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RUNCORN RURAL DISTRICT

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# Annual Report

OF THE

Medical Officer of Health

FOR THE

Year ending 31st December

1956



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# **RURAL DISTRICT AUTHORITY OF RUNCORN**

## **ANNUAL REPORT**

**1 9 5 6**

*by*

**E. N. HILLMAN GRAY, L.R.C.P. & S., L.M., D.P.H.  
MEDICAL OFFICER OF HEALTH  
RUNCORN URBAN AND RURAL DISTRICTS**

### **OFFICIALS OF PUBLIC HEALTH DEPARTMENT :**

- (1) Medical Officer of Health, Runcorn Urban and Rural Districts**
- (2) Divisional Medical Officer of Health**

**Divisional School Medical Officer (Runcorn Division)**

**E. N. HILLMAN GRAY, L.R.C.P. & S., L.M., D.P.H.  
Tel. No.: Frodsham 2186**

### **Public Health Inspectors and Meat and Food Inspectors :**

**D. BOOTHMAN, M.S.I.A., Senior Public Health Inspector**  
National Certificate in Building  
Certified Sanitary Inspector (R.S.I. and S.I.E.J.B.)  
Certified Inspector of Meat and other Foods (R.S.I.)  
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Tel. No.: Frodsham 2186  
Sub-Office, 22 Orchard Street, Stockton Heath.  
Tel. No.: Stockton Heath 1024  
Residence Tel. No.: Frodsham 2219

**G. F. SIXSMITH, Additional Public Health Inspector**  
Certified Sanitary Inspector (R.S.I. and S.I.E.J.B.)  
Certified Inspector of Meat and other Foods (R.S.I.)  
Housing Management Certificate (The Institute of Housing)  
Diploma in General Hygiene Advanced (R.I.P.H. & H.)  
Residence Tel. No.: Warrington 32465

### **Clerk/Pupil Public Health Inspectors :**

**G. W. BATE**

**A. A. KIPPAX, appointed April, 1956.**

### **Clerical Duties :**

**MRS. D. COWAP**

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AN APPEAL TO ALL CONCERNED, ESPECIALLY TO VOLUNTARY SOCIETIES, IS AGAIN MADE TO MAKE FULL USE OF THIS REPORT; DISCUSSION GROUPS, ETC., IN HEALTH EDUCATION SHOULD BE ARRANGED FOR IN THE INTERESTS OF PUBLIC HEALTH AT FREQUENT INTERVALS.

SPECIAL ATTENTION IS DRAWN TO “THE COMMONSENSE PREVENTIVE MEASURES AGAINST DISEASE”.

## RURAL DISTRICT COUNCIL OF RUNCORN, 1956

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From 16th May, 1956

### Chairman of the Council:

COUNCILLOR WILLIAM H. CAPPER, J.P.

### Vice-Chairman of the Council:

COUNCILLOR JOHN W. KIRKHAM

### Health Committee:

COUNCILLOR MRS. J. A. GLOVER, *Chairman*

COUNCILLOR H. R. DONE, *Vice-Chairman*

COUNCILLOR D. L. DAVIES

COUNCILLOR H. JACKSON

„ MRS. K. I. DEWES

„ T. L. LOOKER

„ H. HELSBY

„ G. J. MCQUILLAN

„ H. HILL

„ R. E. PAYTON

„ J. HUNT

„ G. S. WALLWORTH

and Chairman and Vice-Chairman of the Council

### OFFICERS:

#### Solicitor/Clerk of the Council:

Mr. R. PATRICK WILLIAMS, Frodsham

#### Engineer and Surveyor:

Mr B. PRESTON, B.Sc., A.M.I.C.E., M.I.Mun.E., M.R.San.I.,  
Frodsham

## INTRODUCTION

TO THE CHAIRMAN AND MEMBERS OF THE  
RURAL DISTRICT COUNCIL OF RUNCORN

Mr. Chairman, Ladies and Gentlemen,

I have pleasure in submitting to you this my 19th Annual Report for the year-ending 31st December, 1956.

*Population:* There is an increase of 270 in the Registrar General's estimate of the total population from 36,810 in 1955 to 37,080 in 1956.

*Birth Rate:* The Birth Rate per thousand of the population showed a slight increase being 14.1 in 1956 by comparison of 13.36 in 1955.

*Death Rate:* The Death Rate for 1956 was 11.84 per thousand of the population compared with 11.49 in 1955. The total number of deaths in the Runcorn Rural District in 1956 was 439 compared with 423 in 1955. Your special attention is drawn to the detailed table on page 38 which gives the deaths from various diseases (e.g., Coronary Thrombosis, &c.), shown in age groups and sex.

*Infantile Mortality Rate:* The death rate of all infants under one year of age per thousand of live births was 24.85 in 1956 as compared with 14.22 (7 deaths) in 1955 (see page 14.) due to premature births and malformation at birth. The Medical Research Council, &c., are enquiring into this matter as it affects the country generally.

*Incidence of Infectious Disease:* The incidence of infectious disease was less than the previous year; 184 cases were notified as compared with 406 during 1955.

*Tuberculosis:* Though the rate of Pulmonary Tuberculosis remains relatively high, the remarkable reduction in Non-Pulmonary Tuberculosis (1938—69; 1956—24) is to be noted with satisfaction. Clean and pure heat-treated milk is especially the cause of this. The fight against Pulmonary Tuberculosis continues *vide* my remarks in this report on the subject; in addition the full application of the New Clean Air Act, aided by the various sections of the Public Health Act.

### “THE COMMONSENSE PREVENTIVE MEASURES AGAINST DISEASE”

Immediately following this introduction are my “Commonsense Preventive Measures Against Disease”, which I strongly recommend should be read and carried out by all concerned.

*Housing:* The number of applicants for Council houses was 899 at the end of the year under review.

The number of houses owned by the Council at end of the year was 1,386; total number of new houses erected by the Council during the year was 90. The total number of inhabited houses as at 31st December, 1956, was 11,689.

The Five-Year Scheme for dealing with some 300 unfit houses is making progress and in the case of individual unfit houses where the tenants are applicants, priority is being given for re-housing as and when availability of houses permits. Priority is also given in the case of expectant mothers and young children.

It is hoped that in the next year confirmation of the Clearance Areas will have taken place and rehousing of many of those tenants will proceed.

*Ventilation and Heating of Houses, &c.:* From time to time I have stressed the need for a more commonsense approach to this matter in this country. In a letter dated 8th February to the local Press, &c., I stated as follows:—

“The question of ventilation and heating in the British Isles requires **urgent** investigation in that sometimes through sheer lack of thought, draughty, cold houses are experienced (and so ‘colds’, &c.), when with the use of some *commonsense* proper ventilation and heating would be available—and so better health.”

(*N.B.*) *Ventilation:* This means movement of air without draughts; windows and doors should be made draught-proof and a simple and proper system of



*controlled ventilation* arranged; for this ask an expert, e.g., a ventilation/heating Engineer, your local Surveyor or Public Health Inspector.

*Heating:* This must be adequate, not too much or insufficient, many rooms and corridors, especially in large houses require a *minimum of central heating*, e.g., a hot pipe running through them; this may be added to by ordinary coal fires (preferably smokeless), electric or gas fires in certain rooms; again ask experts as suggested under ventilation above. *Do not forget the bathroom.*

*General:* Much ill-health can be prevented if more *commonsense* was used in these important matters. A room thermometer is useful in seeing these are kept at the right *temperature and humidity*. If in doubt ask an expert as suggested above; the cost will *not* be much, balancing this *better health will be the result* for ourselves and visitors from overseas.

**N.B.:** The policy of placing heating at nearly roof level is wrong and may cause various diseases (e.g., head and shoulders hot—feet cold). The appropriate Ministry, &c., should enquire into this important matter again.

*Flies:* As stated in my Commonsense Preventive Measures against Disease:—

(a) FLIES: Any dirt, faeces, manure, etc., **in which flies breed** must be disposed of quickly and thoroughly (burying and **well covering** these with earth is one of the best ways). Flies should be destroyed by, e.g., fly sprays, fly swats, fly papers, etc., and food larders, pail closets, and bins **must** be fly proof. Food **must** be protected from dust, dirt, flies, rats and mice, and kept in a cool well ventilated place. Disinfectant solution **must** be used to **cover** contents in pail closets.

**WHY?** Flies **carry** disease germs (in and on their bodies) from all kinds of dirt to food, and so spread diseases.

We are not sufficiently “*FLY CONSCIOUS*”—every effort *must* be made to cure this and so help to prevent many intestinal diseases including Polio-myelitis, Enteritis, Typhoid and Food Poisoning.

*Cleanliness of HANDS AND NAILS:* My remarks above about *Flies* should be read in conjunction with this in my Commonsense Preventive Measures against Disease . . . it is stated:—

**CLEANLINESS.** (a) This **must** be thorough in or around the house, kitchen, shop, larder, etc. (This **also** applies to feeding bottles and teats.) **WHY?** Where these are **absolutely** clean there are few, if any, disease germs. Feeding bottles and teats **must** be thoroughly washed and boiled prior to use. If in doubt ask your Public Health Department, Welfare Centre, Health Visitor, or District Nurse.

(b) This also applies to those who handle and cook food, especially the hands and nails.

**N.B.:** **WHY?** Dirt (with disease germs) may be on the hands or **under the nails** and so spread disease germs to food; **always** thoroughly wash the hands **and clean under the nails** after using the lavatory.

We must **NOT** be prudish about this, for the facts are the germs of Polio-myelitis, Typhoid, &c., may be in the bowels and when we use the lavatory, our hands and nails may become infected—so it is *essential* to *thoroughly* wash and clean these after using the lavatory—as mentioned above under “*FLIES*”; if this was drilled into schoolchildren (at school and at home) and all other diseases, as mentioned under *Flies* above (with the aid of protective immunisation) would be eventually wiped out (using also vaccination, &c., against various diseases).

*Disease Spread from Animals to Humans:* It is good to note that Medical and Veterinary Research workers, &c., are co-operating more and more in this important matter. Tropical Diseases have been cut to a minimum all over the world by this method of spread of disease being recognised and dealt with.

*Vaccination and Immunisation:* It is understood that in the near future one vaccine may be available (for babies—then a booster dose later) to include in



this prevention against Poliomyelitis, Diphtheria, Whooping Cough, Tetanus and possibly Measles—this will be an efficient way which will prevent the many injections to children as given today.

*Important—*

(i) *Allergic Diseases*: As quoted in my Commonsense Preventive Measures against Disease—in a large percentage of cases can be cured—the diseases for example, Migraine, Hayfever, Asthma, some types of Eczema (especially in children) due to allergy, cause much unnecessary suffering; by seeing a Doctor (tests, &c.) many of these can be cured or relieved; this also applies to contact “Dermatitis”.

(ii) *The Menopause* (change of life in women and men)!! This is a *natural* sequence of events in anyone’s life and must be ‘faced up to’—it can affect persons in varying degrees, sometimes not at all. I *must* stress that, for example, in the case of women, treatment by e.g. “T.A.C.E.” (*special* gland extract treatment) via your own Doctor and/or a Specialist, can cure most cases. If in doubt it is your duty to yourself and all concerned, to consult those as stated above.

Finally may I quote a summary of a lecture (also gramophone and tape recorded) on “Health and the Joy of Life”:

1. Develop proper contacts every day so that they will “switch on” and give you the right knowledge and stimulus to live; so developing your mental, physical and spiritual life together. At all ages develop the “Outward Bound” spirit.

2. Look after the three “T’s”—Tonsils, Teeth and Tummy. See your Doctor and Dentist when you need to, but whether fit or not be examined by your Doctor at least once a year and your Dentist every six months.

3. Eat proper food daily, a varied diet cooked properly, and include in it the preventive foods—those which prevent disease—Milk, Eggs, Fresh Vegetables (both cooked and in salads), Fruit, Animal Fat and Fish, especially Herrings. Do not forget the importance of flavour in your cooking, use e.g., onions, leeks and all the herbs.

4. If in doubt as to the purity of water, or if milk is not pasteurised, boil them.

5. Be clean—use soap and more “*elbow grease*”.

6. If you want to know of any contact, that is, to commence any organisations in your district, write to your Medical Officer of Health.

7. Study the books on Hygiene by the Red Cross and St. John Societies. Listen to the Radio Doctor and study *his* books.

8. *Finally, with the team spirit fully developed in you, work hard, play hard and learn to relax.* You will then have gained something towards enjoying “*Health and the Joy of Life*”.

## SANITARY CIRCUMSTANCES IN THE AREA:

The details under this Section have been compiled by Mr. D. Boothman, M.S.I.A., Senior Public Health Inspector.

## ANNUAL REPORT—DIVISIONAL MEDICAL OFFICER OF HEALTH for the year-ending 31st December, 1956

(by agreement with the Cheshire County Council and my local Council)—this report is included as an Appendix “A” and attached hereto.

Over a period of nearly 20 years the co-operation and help of *all* concerned outside my offices, in the Public Health Department and other departments has been greatly appreciated by me in the carrying out of my various duties.

Yours obediently,

E. N. HILLMAN GRAY,  
L.R.C.P. & S., L.M., D.P.H.  
Medical Officer of Health

## IMPORTANT

### THE COMMON SENSE PREVENTIVE MEASURES AGAINST DISEASE

- (1) **CLEANLINESS.** (a) This **must** be thorough in or around the house, kitchen, shop, larder, etc. (This also applies to feeding bottles and teats.)

WHY? Where these are **absolutely** clean there are few, if any, disease germs. Feeding bottles and teats **must** be thoroughly washed and boiled prior to use. If in doubt ask your Public Health Department, Welfare Centre, Health Visitor, or District Nurse.

(b) This also applies to those who handle and cook food, especially the hands and nails.

WHY? Dirt (with disease germs) may be on the hands or **under the nails** and so spread disease germs to food; **always** thoroughly wash the hands and **clean under the nails** after using the lavatory.

- (2) **DESTRUCTION OF FLIES, RATS AND MICE.**

(a) **FLIES:** Any dirt, faeces, manure, etc., **in which flies breed** must be disposed of quickly and thoroughly (burying and **well covering** these with earth is one of the best ways). Flies should be destroyed by, e.g., fly sprays, fly swats, fly papers, etc., and food larders, pail closets, and bins **must** be fly proof. Food **must** be protected from dust, dirt, flies, rats and mice, and kept in a cool well ventilated place. Disinfectant solution **must** be used to **cover** contents in pail closets.

WHY? Flies **carry** disease germs (in and on their bodies) from all kinds of dirt to food, and so spread diseases.

(b) **RATS AND MICE:** For the destruction of these ask your chemist; failing this your Public Health Inspector (who is also the Rodent Officer).

WHY? Rats and mice breed in all kinds of dirt, and like flies carry disease germs to food (and water).

- (3) **FOOD** should be **properly** heat treated; this applies especially to the manufacture of ice cream, the cooking of shell-fish, and the pasteurisation and sterilization of milk. Where milk is not pasteurised or sterilized I recommend that this is boiled at home.

WHY? By proper heat treatment, any disease germs present are destroyed. This applies to all kinds of food, including ice cream, shell-fish and milk.

- (4) **WATERCRESS** must be obtained from properly controlled beds, that is, where pure water is supplied; **this with lettuce and fruits** without a fairly thick outside coat, should be thoroughly washed in a weak Condyl's solution and then rinsed with pure water before being eaten.

WHY? Watercress can carry disease germs on it; this also applies to lettuce and fruit.



- (5) **DRIED EGGS AND DRIED MILK** must be kept in a cool place, and when the package is opened it should be used up quickly.

WHY? These are good foods, but if the containers are left open to the air too long (e.g., over two days) germs can grow in them and so spread disease.

- (6) **ALL WATER FOR DRINKING, DIETETIC OR DAIRY PURPOSES** should be from a pure supply; if in doubt as to its purity, boil it well for small quantities, or chlorinate it for large quantities—see instructions on bottles obtainable from most chemists. **Do not bathe in rivers, etc.**, which may be sewage polluted.

WHY? Water, if impure, can have disease germs in it; boiling or chlorination kills disease germs. If you bathe in rivers, canals, etc., which may be sewage polluted, you may swallow disease germs.

- (7) **CONSTIPATION.** This *must* be avoided, for example, by eating sufficient roughage food, e.g., whole-meal bread and vegetables also by keeping the stomach muscles strong and healthy by games and P.T. exercises. If in doubt see your own doctor. Many diseases might be traced to chronic constipation.

WHY? If constipated, foul matter remains too long in the lower bowel so poisoning the blood and also holding disease germs in the bowel which may infect the body.

- (8) (a) **TO AVOID SPREADING “COLDS IN THE HEAD”, INFLUENZA, etc.** Use a handkerchief when you cough or sneeze.

WHY? A handkerchief acts as a screen and so catches disease germs from the nose and throat. Disinfect and boil handkerchiefs well prior to washing. Wet feet, wet clothes, and draughts cause chilling of the body and so render it more liable to disease.

(b) **COVERING UP THE MOUTH WHEN COUGHING OR SNEEZING.** Coughing or sneezing on *food*, for example, after influenza, etc., may cause a serious attack of e.g., enteritis, diarrhoea, etc., especially in babies and young children.

WHY? Because germs causing *serious* disease enter on or into food . . . **DO NOT COUGH OR SNEEZE** onto food: cover the mouth and nose with a handkerchief or etc., See your own doctor as required for treatment.

- (9) **ALLERGIC DISEASES.** The diseases for example, Migraine, Hayfever, Asthma, some types of Eczema (especially in children) due to allergy, cause much *unnecessary* suffering; by seeing a Doctor (tests, etc.) many of these can be cured or relieved; this also applies to contact “Dermatitis”.
- 10) **PROTECTIVE INJECTIONS AGAINST DIPHTHERIA, SMALL-POX, etc.** See that all (especially young children) have these as required.

WHY? By these injections the body is more fully protected against dangerous diseases. If in doubt ask your own doctor, Medical Officer of Health, Welfare Centre, Health Visitor, or District Nurse.



- (11) **PROPER DISINFECTION OF HOUSES**, etc. After any serious disease in a house, etc., see that this is carried out (ask your Public Health Department, Sanitary Inspector), **also a thorough** “spring-cleaning”. The latter would be sufficient in less serious diseases such as Influenza, Measles and Whooping Cough.

WHY? By this, disease germs are destroyed or washed away and so cannot infect others.

- (12) **ISOLATION OF CONTACTS OF INFECTIOUS DISEASE**. Carry out thoroughly what is recommended on the special pamphlet issued by the Medical Officer of Health when patients are sent to hospital or nursed at home.

WHY? By so doing disease germs are less likely to spread. If in doubt ask your own doctor or Public Health Department (e.g., your Public Health Inspector). This also applies to any sick animals (indoors or outdoors); in doubt call in a Veterinary Officer.

- (13) **DEFECTIVE TEETH**. See your dentist if your teeth are bad or septic; better still see him as a routine every six months.

WHY? If your teeth are bad or septic the chewing powers are not good and so all kinds of indigestion may arise. Septic teeth (and gums) lead to poisoning of the blood and so to various diseases.

- (14) **THE PREVENTIVE FOODS**. Eat some of these daily in your daily diet which **must** be properly cooked, varied and flavoured.

WHY? The preventive foods (i.e., those which help the body to prevent disease) are:—

Milk and eggs (dried or ordinary);  
Cheese;  
Fresh vegetables and fruit (cooked or in salads);  
Animal fats, e.g., fish (especially herrings), and butter;  
Margarine (vitaminised);  
Whole meal bread;

These all contain valuable substances called **VITAMINS** which are *essential* to good health. Where these essential foods are in short supply, etc., all concerned are reminded that extracts of these vitamins are contained in e.g., Rose Hip Juice and/or Ribena, Marmite, Yeast, certain tablets (all vitamins). *Parents are recommended to bottle or preserve fruit when it is cheap.*

- (15) **OBESITY** (over-weight): How can this be the cause of many serious diseases and can shorten life . . . ?

WHY? By “clogging-up” of the blood vessels, the various organs of the body, disease can commence. By eating less fat and starchy foods at each meal, with more variety and taking, for example, small quantities of milk or sweets between meals, less fat, etc., will enter the body. Moderate, regular daily exercise, e.g., a walk, will help to “burn-up” fat. Guard against constipation. If in doubt see your own doctor.

- 16) RETIREMENT, Semi-RETIREMENT and OLD AGE: (also secondary employment in youth).

*Question:* What should one do to prepare for these (the proper use of leisure)?

*Answer:* As early as possible, and as necessary, seek the guidance first of, for example, your Medical Officer of Health, and/or Health Visitor, who will (acting in a "guidance service") refer you to other agencies—official and voluntary.

Remember *Old Age* is a *normal state*, but the diseases associated with it are not; see your own doctor as required, so that not only years can be added to life, but life can be added to years.

Loneliness, boredom and monotony *must* be dealt with by using the brain and body—for example, with hobbies of all kinds, other employment, etc. . . . See your own padre as required.

EVERYDAY is a BIRTHDAY and EVERYDAY we are born anew. Younger persons working a 4 to 5 day week should in the same way as above, prepare for a new world of *secondary employment* (owing to for example, automation, the atomic age)—for this see your Ministry of Labour—Youth Employment Department, or, as above, your Medical Officer of Health and/or the Health Visitor. Ask your local Education Office, for under the Education Act, 1944, any subject (theory or practice) can be taught to *any* person at a very small cost to the person per week. Finally—EARN HAPPINESS BY GIVING.

## GENERAL

- (1) Anyone feeling ill should see their own doctor (better still, as a routine, see him once a year)—though with the above common-sense precautions there should be little danger of contacting or spreading disease.
- (2) ASK FOR MORE OF THESE PAMPHLETS AS REQUIRED FROM YOUR MEDICAL OFFICER OF HEALTH. Have discussion groups, lectures and films on health education. Attend the official classes on personal hygiene given by, e.g., the Red Cross Society, St. John Association, Scouts and Girl Guides—these organisations have excellent little books on the subject. Always carry out these common-sense preventive measures and *tell others about them*.
- (3) Good health mostly depends on YOU—your co-operation is essential.

“WHERE THERE IS DIRT THERE IS DISEASE”

E. N. HILLMAN GRAY, L.R.C.P.&S., L.M., D.P.H.

Medical Officer of Health, Runcorn Urban & Rural Districts  
Divisional Medical Officer and School Medical Officer.

## PUBLIC HEALTH DEPARTMENTS:

1. Brunswick Hall, Brunswick Street, Runcorn.
2. Castle Park, Frodsham.



## SECTION A

## STATISTICS AND SOCIAL CONDITIONS OF THE AREA

(a)	Area (in acres)	....	....	....	....	45,552
(b)	Estimated population (Registrar-General)	....	....			37,080
(c)	Number of inhabited houses (end 1956) according to the Rate Book	....	....	....	....	11,689
(d)	Rateable value of the District (end 1956)	....	....			£390,414
(e)	Sum represented by one penny rate (approx.)	Net				£1,571
(f)	Density of Population. Number of persons per acre (estimated population)	....	....	....	....	1.23
(g)	Average number of persons per inhabited house (estimated population)	....	....	....	....	3.17

## Social Conditions

Agriculture and dairy farming are the chief industries of the district; other industries are tanneries, electric cable, electric fittings, steel tube works, wire works, flour mills and jam works. Sand quarrying is being carried on in the district, chiefly at Whitley and Moore.

Parts of the district are mainly residential.

**Unemployment.**—Exact statistics are not available for this area as the figures obtained by the local offices of the Ministry of Labour related to the areas served by such offices and these areas are not identical with the Runcorn Rural District. The incidence of unemployment, however, was low in the area.

Many of the inhabitants are employed in industrial areas outside the district.

**Children's Homes.**—There is a National Children's Home at Frodsham (185 children), one open-air Convalescent School for Jewish Children at Norley.

## VITAL STATISTICS

			<i>Total</i>	<i>M.</i>	<i>F.</i>
Live Births—Legitimate	....	....	504	267	237
Illegitimate	....	....	19	8	11
			<hr/>	<hr/>	<hr/>
			523	275	248

Birth rate per 1,000 of the estimated resident population .... 14.10



			<i>Total</i>	<i>M</i>	<i>F</i>
Still Births—Legitimate	....	....	4	2	2
Illegitimate	....	....	1	1	0
			<hr/>	<hr/>	<hr/>
			5	3	2

Rate of Still Births per 1,000 total (Live and Still births): 9.56.

Deaths      ....      ....      ....      ....      439      232      207

Death Rate per 1,000 of the estimated resident population .... 11.84

### Deaths from Puerperal Causes

(Heading 30 of the Registrar-General's Short List):

No. 30 Pregnancy, childbirth, abortion.....Nil

### Death Rate of Infants Under One Year of Age

All Infants per 1,000 live births (13 deaths) .... Death Rate 24.85  
 Legitimate Infants per 1,000 legitimate live births .... 21.83  
 Illegitimate Infants per 1,000 illegitimate live births .... 105.2

### Particulars of any Unusual or Excessive Mortality during the year which has received or required comment

The causes of the highest mortality were:

Heart Disease .... 139 (*Vide* Registrar-General)

Cancer .... 74      „

Heart Disease was prevalent in persons over 65 years of age, some cases may have been due to the effects of e.g., Rheumatism in childhood—this is being further investigated under the auspices of the Ministry of Health (lack of vitamin C, improper diet, gland deficiency, etc.).

For further remarks on Cancer see page 41 (i.e., further research, early treatment, etc.).

### COMPARISON RATES

<i>Year</i>	<i>Population</i>	<i>Birth Rate</i>	<i>Death Rate</i>	<i>Infantile Mortality Rate</i>
1946	32,760	16.9	11.69	32.43
1947	32,930	16.85	11.93	48.6
1948	34,230	15.37	11.08	36.13
1949	34,550	11.75	11.92	27.66
1950	35,580	13.91	10.72	20.20
1951	35,510	13.83	13.89	48.88
1952	35,520	13.86	11.38	20.32
1953	35,800	13.63	10.28	22.54
1954	36,260	13.59	12.58	24.34
1955	36,810	13.36	11.49	14.22
1956	37,080	14.10	11.84	24.85

A table on page 39 gives the Birth Rate, Death Rate and analysis of mortality during the year 1956 and comparisons with England and Wales.

### Summary of Deaths of Infants under 1 year of age

1 (a) Prematurity	....	....	....	Female aged 14 hours
1 (a) Broncho Pneumonia, (b) Primary Atelectasis, (c) Prematurity	....			Male aged 4 days
1 (a) Primary Atelectasis, (b) Cerebral Oedema	....	....	....	Male aged 6 hours
1 (a) Prematurity	....	....	....	Female aged 18 hours
1 (a) Broncho Pneumonia, (b) Fibrocystic disease of Pancreas	....	....		Male aged 3 months
1 (a) Atelectasis, (b) Intra-uterine aspiration of meconium	....	....		Female aged 1 day
1 (a) Congestive heart failure, (b) Congenital heart disease	....	....		Male aged 5 days
1 (a) Gross prematurity (weight 2lb. 11oz.)				Female aged 3 days
1 (a) Atelectasis, (b) Prematurity	....			Male aged 1 day
1 (a) Prematurity (twins) 3lb. 10oz.	....			Male aged 14 hours
1 (a) Prematurity (twins) 3lb. 3oz.	....			Male aged 7 hours
1 (a) Prematurity	....	....	....	Male aged 4 hours

### Prevention of any Unusual or Excessive Mortality—Children

Treatment in a General Hospital or an Infectious Disease Hospital, etc., is available for all such cases if any Doctor decides that treatment will benefit, and the patient is fit to be moved. Premature births are specially treated in Hospital or Nursing Homes. District Nurses assist in nursing at home (via the patient's own doctor).

The above is in addition to Health Education, Welfare Schemes and Clinics, etc.

## SECTION B

### GENERAL PROVISIONS OF HEALTH SERVICES FOR THE AREA

#### 1. Public Health Officers

The names and qualifications, districts, addresses and telephone numbers are given at the beginning of the Report.

#### 2. Laboratory Facilities

The Biological Institute of Messrs. Evans Medical Supplies is established in Runcorn. Query Anthrax cases can be examined here and necessary treatment given as required; prior to any hospital atment.

With the facilities given by the Public Health Laboratory, Hamilton Square, Birkenhead, Public Health Laboratory, Mount Pleasant, Liverpool, the Public Health Laboratory, Monsall Hospital, Newton Heath, Manchester, and the Public Health Laboratories at Warrington and Chester Royal Infirmaries, also various General Hospital Laboratories, all concerned will now be able to make fuller arrangements for pathological overhauls *so essential* in certain cases. It is hoped that this extended service will give all concerned further facilities in the investigation of infectious disease and disease generally (e.g. by pathological overhauls).

Milk is sent to the Public Health Laboratory, Hamilton Square, Birkenhead.

V.D. specimens are sent to the laboratories mentioned above, as required.

## SECTION C

### 1. Water

(i) The water supply of the area has been satisfactory both in quality and quantity, with the exception of isolated farms and houses not on a mains supply.

(ii) Mains supplies and results of chemical analyses and bacteriological examinations are as follows. Parishes refer to the main areas; outlying portions of parishes may be connected to other mains.

Alvanley and Helsby—by the Council from Helsby Wells.

Dutton, Kingsley, Norley, Preston Brook and Sutton—by the Council from Liverpool (Vyrnwy) bulk supplies.

Frodsham, Manley, Antrobus and Whitley—by the Council from Warrington Corporation bulk supplies.

Stockton Heath, Grappenhall, Walton, Appleton, Stretton, Moore, and Daresbury—by Warrington Corporation.

Halton and Clifton—by Runcorn and District Water Board.

Aston and Norton—by private estate mains, the bulk supply being Liverpool (Vyrnwy).

Budworth—by the Council from Mid and South East Cheshire Water Board bulk supplies.



<i>Chemical Analyses</i>	<i>Helsby Well (no treatment) to Alvanley, Helsby</i>	<i>Warrington Harrol Edge to Frodsham, Manley,</i>	<i>Liverpool Vyrnwy to Aston, Dutton, Kingsley, Norley, Norton, Preston Brook, Sutton</i>	<i>Runcorn and District Water Board to Halton</i>	<i>Warrington Vyrnwy mixed to Stockton Heath Area and most other Parishes</i>	<i>Mid and South-East Cheshire Water Board to Budworth Village and Ball Lane, Kingsley</i>
Date ....	10.1.56	8.1.55	17.7.56	25.1.55	25.1.55	10.1.56
Appearance ....	Clear and Colourless	Clear and Colourless	Clear and Colourless	Clear and slight yellow	Clear and Slight Yellow	Clear and Colourless
Odour ....	Nil	Nil	Nil	Nil	Nil	Nil
Reaction ....	pH 7.15	pH 7.45	pH 6.4	pH 6.6	pH 7.8	pH 7.3
<i>Parts per million</i>						
Total solids ....	260	200	65	76	68	230
Nitrogen as free and saline ammonia ....	0.00	0.00	0.00	0.00	0.00	0.00
Nitrogen as albuminoid ammonia ....	0.00	0.00	0.00	0.00	0.01	0.00
Nitrogen as nitrites ....	Nil	Nil	Nil	Nil	Nil	Nil
Nitrogen as nitrates ....	0.25	2.75	0.75	0.05	0.05	2.25
Chlorides as Cl. ....	42.5	34.5	9.5	8.7	9.1	26
Oxygen absorbed from permanganate in four hours at 27° C. ....	0.11	0.085	1.3	2.42	2.15	0.34
Total hardness ....	208	125	16	19.5	29.5	171
Temporary hardness ....	174	100	12	13.0	18	102
Permanent hardness ....	34	25	4	6.5	11.5	69
Alkalinity as CaCo <sub>3</sub> ....	174	100	12	13.0	18	102
Free chlorine ....	Nil	Nil	Nil	Nil	Nil	Nil
Poisonous metals ....	Nil	Nil	Nil	Nil	Nil	Nil
<b>Bacteriological Examination:—</b>						
Date ....	6.11.56	15.10.56	10.9.56	15.10.56	30.11.56	17.9.56
Probable number of coliform bacilli per 100 m.l. ....	Nil	Nil	Nil	Nil	Nil	Nil
% of above faecal coli Report ....	Satisfactory	Satisfactory	Satisfactory	Satisfactory	Satisfactory	Satisfactory

### Analyst's Opinion

Helsby 10.1.56—The chemical analysis of this water is satisfactory

Warrington Harrol Edge 8.1.55.—The chemical analysis of this water is satisfactory.

Liverpool Vyrnwy 17.7.56.—The chemical analysis of this water is satisfactory.

Runcorn and District Water Board 25.1.55.—The chemical analysis of this water is satisfactory.

Warrington Vyrnwy mixed 25.1.55.—The chemical analysis of this water is satisfactory.

Mid and South-East Cheshire Water Board 10.1.56—The chemical analysis of this water is satisfactory.

(iii) Private water supplies are bacteriologically examined at least once per year. Where, as a result of such sampling, the supplies have been established as unsatisfactory, Notices advising that the water be boiled or chlorinated before drinking, dietetic and dairy purposes are sent and repeated quarterly to the owners and occupiers.

Where farms and farm cottages are concerned, the owners are strongly advised to obtain a mains supply with the assistance of the Cheshire Agricultural Committee under the Agricultural (Misc. Prov.) Act, 1944, Sec. 5.

There is a poor supply in several areas:—

Great Budworth, Whitley, Antrobus and Dutton, possibly arising out of the mains being too small for the work they now have to do. Scraping of the Dutton mains is under active consideration by the Surveyor.

Preston Brook.—The scraping and reconditioning of the mains has been done resulting in considerable improvement.

Appleton Thorn Area.—This has been referred to the supplying Authority, Warrington Corporation.

Mains extensions were carried out for new housing development. Fourteen houses were connected to mains supplies.

(iv)

Parish	(a) Public Water Mains				(b) Private Supplies					
	Direct to house		Standpipes		Private Water Mains		Wells and Springs			
							Good Quality		Suspicious or unsatisfactory Quality	
	Houses	Population	Houses	Population	Houses	Population	Houses	Population	Houses	Population
Alvanley .....	89	288	—	—	—	—	—	—	4	12
Antrobus .....	219	678	1	5	—	—	—	—	5	15
Appleton .....	1329	3476	—	—	—	—	—	—	1	3
Aston .....	45	134	—	—	27	87	—	—	—	—
Budworth (Great) .....	119	364	—	—	—	—	—	—	—	—
Daresbury .....	81	266	—	—	—	—	—	—	2	5
Dutton .....	97	417	—	—	—	—	1	3	—	—
Frodsham .....	1713	5483	1	3	—	—	—	—	2	10
Grappenhall .....	1842	5892	—	—	—	—	—	—	—	—
Halton .....	460	1687	—	—	—	—	—	—	—	—
Hatton .....	97	320	—	—	—	—	1	5	2	6
Helsby .....	943	3020	—	—	—	—	—	—	—	—
Kingsley .....	351	1342	15	37	—	—	2	8	4	11
Manley .....	154	659	—	—	—	—	1	3	—	—
Moore .....	177	566	—	—	—	—	—	—	—	—
Norley .....	288	989	—	—	—	—	1	4	1	4
Norton .....	16	60	—	—	25	81	—	—	—	—
Preston Brook .....	131	389	—	—	1	4	—	—	3	9
Stockton Heath .....	2329	7424	—	—	—	—	—	—	—	—
Stretton .....	143	468	—	—	—	—	—	—	2	7
Sutton .....	233	709	—	—	—	—	—	—	—	—
Walton .....	517	1649	—	—	—	—	—	—	—	—
Whitley .....	179	580	3	9	—	—	—	—	—	—
Totals .....	11552	36860	20	54	53	172	6	23	26	71



## 2. Drainage and Sewage

Kingsley and Norley.—The Ministry of Housing and Local Government held a local investigation. The outcome was that the scheme for Kingsley only was recommended at this stage. Details of such a scheme was forwarded to the Ministry.

Frodsham—Hares' Lane Pumping Station, an outline scheme was submitted to the Ministry.

Other matters requiring attention in the future are:—

1. Helsby — new intercepting sewer and sewage disposal works extensions.
2. Great Budworth — sewers and sewage disposal works.
3. Stretton — sewage disposal improvements.
4. Acton Grange — works enlargements.
5. Moore — sewage disposal improvements.
6. Grappenhall, Stockport Road — sewers.

When septic tanks are installed it is important that *adequate filtration or subsoil irrigation* is provided to prevent pollution of watercourses and ditches. *In addition, the septic tanks should be maintained and desludged at regular intervals.* Many inspections have been carried out in connection with existing installations and in giving advice on new proposed works.

Drainage systems of existing properties were connected to public sewers, 3 at Grappenhall Road, Stockton Heath, 1 at Preston Brook.

## 3. Rivers and Streams

Pollution of ditches and stream remains a problem owing to the erection of new houses, improved sanitary appliances to existing houses and improved milk and dairy technique in parishes without sewers. Private owners are advised on the best type of septic tanks and filters for their property. Where such properties are in groups, the only final satisfactory solution is the provision of a sewer and sewage disposal works. Liquor from cowsheds presents a particularly difficult problem where it is not collected and returned to the land as manure.

A second cesspool-emptying vehicle was obtained. They are used for desludging septic and settling tanks on Council and private property, and for the collection of nightsoil. They adequately cover the needs of the District.

For private work the Council charge 15/- per hour with a minimum charge of 15/- and require the applicant to have the access covers of the tanks loosened and opened up in readiness. The charge for industrial and farm liquor tanks is 30/- per hour.

All owners of properties having septic tanks have been invited to make use of this service, either by separate orders or by continuing contracts.



Where plans are submitted to the Engineer and Surveyor involving drainage systems not connected to a public sewer, the observations of this department have been sought on the efficiency of the proposed drainage disposal.

Pretreated effluents from two tanneries at Grappenhall are received into the Council's sewer which has improved the condition of the stream previously receiving the drainage, some pollution still occurs occasionally owing to the failure of the tannery plant to deal with all the effluent in the settling tanks.

The pollution of the non-tidal section of the Manchester Ship Canal continues, and causes objectionable odours after a prolonged period of warm weather (reported to the appropriate Rivers Board who have the matter under consideration).

#### 4. Closet Accommodation

Twenty-one conversions to the water carriage system were carried out. Where this has been done voluntarily by the owners and is not part of an improvement grant, the Council has, when requested paid a grant up to £15 provided that where a public sewer is not available, the owners will at their own expense connect to a public sewer when it becomes available.

#### 5. Public Cleansing

This is carried out by the Engineer and Surveyor under direct labour. Disposal is by tipping and levelling with earthing over at intervals at two main tips and several smaller ones. Nuisance arises from flies, crickets and rat infestation, and to minimise this in the interests of public health and amenity *fully-controlled tipping is necessary*.

A tractor with mechanical shovel and bulldozing blade has been purchased for use on the tips which much improves the control.

*D.D.T. or Gammexane types of insecticide should also be used on tips as and when required, especially in warm weather.*

The cesspool emptying vehicles are adapted for the collection of the contents of pail closets and enables the collection and disposal of the nightsoil by discharging into the sewers to be carried out with the minimum of nuisance.

#### 6. Sanitary Inspection of the Area

The following tabular statement is furnished by the Senior Public Health Inspector under Article 27 (18) of the Sanitary Inspectors (Outside London) Regulations, 1935, or Article 19 of the Sanitary Officers Order, 1926:—

Nature of Inspections		No. of Inspections	Informal Notices	Statutory Notices
Dwelling Houses (Housing Acts) ....	....	422	26	23
Dwelling Houses (Improvement Grants) ....	....	121	—	—
Dwelling Houses (No. of Inmates and queries re Council house applications)....	....	154	—	—
Dwelling Houses (Public Health Act) ....	....	431	80	5

## Defects in the foregoing:

(a) Roofs, gutters and rain-water pipes	—	45	2
(b) Sanitary fittings	—	20	—
(c) Other defects	—	41	3
Schools	5	—	—
Movable Dwellings	115	15	—
Water Supplies (Samples)	62	—	—
(Other Inspections)	27	6	—
Closet Conversions	18	—	—
Cesspools and Septic Tanks	153	7	—
Sewer Connections	12	2	—
Sewers and Drains	282	19	4
Colour Tests	67	—	—
Ditches, Brooks	72	7	—
Refuse Collection and Disposal	39	—	—
Streets, Yards and Passages	16	—	—
Foul Accumulations	8	3	—
Tipping on Waste Lane	86	113	—
Vermin (Rats and Mice)	102	4	—
(Insects)	51	—	—
Piggeries and keeping of animals	21	3	—
Dairies and Milk Retailers	28	—	—
Milk Samples	43	—	—
Factories and Workshops	32	2	—
Shops and Foodstores	506	90	—
Bakehouses	14	—	—
Food Inspection (Shops)	44	—	—
Slaughter Houses (Meat Inspection)	258	—	—
Canal Boats	—	—	—
Zymotic Inquiries	73	—	—
Visits to Contacts and Schools	60	—	—
Mortuaries	26	—	—
Petrol Stores	37	—	—
Hutted Camps	33	—	—
Miscellaneous	75	—	—
Health (Divisional matters, etc.)	10	—	—
Interviews with Builders, Owners and Agents	186	—	—
Ice-Cream Samples	24	—	—
Smoke Abatement	14	—	—
Soil Samples	6	—	—
TOTALS	3722	483	37



## SHOPS

**7. Shops Act, 1950.**

No. employing persons	....	....	....	....	....	142
No. employing members of own family only				....	....	166
						<hr/> 308 <hr/>

**8. Smoke Abatement**

The Council remains a constituent Authority with the Manchester Regional Smoke Abatement Committee and makes a contribution to its fund for providing special Smoke Inspectors.

The Clean Air Act 1956 received Royal Assent and certain provisions came into operation on the last day of the year.

Its full implementation over the next few years should prevent much of the Smoke Pollution now experienced.

The problem of emission of the sulphur still remains to be solved (research, etc., proceeding by e.g. Department of Scientific and Industrial Research, etc.).

Action by the appropriate Government Departments in supplying smokeless fuels *at a reasonable cost*, etc., for the house, factory, etc., would go a long way in reducing the nuisance, in addition *proper stoking*.

- (i) Where there is *smoke*—there is fuel being wasted, and so Air Pollution with its nuisance and danger to health.
- (ii) Preventive Measures are available for No. (i) above.
- (iii) We are entitled to clean air in the same way as we have clean water etc.

The general public, owners of factories, etc., should be aware of this.

Noxious odours were occasionally noted in the district arising from certain large industrial works outside the district, when the wind is in a certain direction, fortunately not the prevailing wind. The matter was referred to H.M. Alkali Inspector (Factory Inspector). Little nuisance was observed in 1955 and 1956, due to action by the latter, and pressure brought on the Company by the Runcorn Rural District Council.

**9. Rats and Mice Destruction**

The Senior Public Health Inspector acts as Roden Officer—one full-time Rodent Operative is employed. The Council co-operates with the Cheshire Agricultural Executive Committee who carry out rodent destruction on agricultural premises.



Treatment was offered to industrial premises at a charge of cost of labour and materials. Some of these, schools, and two cooking depots, receive treatment as required on this basis—12 others preferred to enter into contracts as before. Dwelling houses receive free treatment unless the infestation is due to lack of hygiene or the unsatisfactory keeping of animals or poultry, in which case a charge is made. Warfarin with an oatmeal base was used with satisfactory results.

Some 986 properties were inspected and of these 374 were treated.

The Council has 17 tips, sewage outfalls and properties which receive treatment as required. The sewer systems in Appleton, Daresbury, Frodsham, Grappenhall, Halton, Hatton, Helsby, Moore, Stockton Heath, Sutton and Walton, were test baited and infestation was found in Frodsham, Grappenhall, Stockton Heath and Walton, to a limited degree. The infested portions received two maintenance treatments.

**10. FACTORIES ACTS, 1937 and 1948**  
**Home Office Form 572 (Revised)**

1. Inspections for purposes of provisions as to health, including inspections made by Public Health Inspectors :

<i>Premises</i>	<i>Number on Register</i>	<i>Inspec- tions</i>	<i>Written notices</i>	<i>Occupiers Prosecuted</i>
(i) Factories in which Sections 1, 2, 3, 4, and 6 are to be enforced by Local Authorities.	28	14	—	—
(ii) Factories not included in (i) in which Section 7 is enforced by the Local Authority	90	12	2	—
(iii) Other premises in which Section 7 is enforced by the Local Authority (excluding outworkers' premises)	43	6	—	—
<b>TOTAL</b>	161	32	2	—

2. Cases in which defects were found

Particulars	Number of cases in which defects were found			Number of cases in which prosecutions were instituted
	Found	Remedied	Referred to H.M. Inspector by H.M. Inspector	
Want of Cleanliness (S.1.)	—	—	—	—
Overcrowding (S.2) ....	—	—	—	—
Unreasonable temperature (S.3) ....	—	—	—	—
Inadequate ventilation (S.4) ....	—	—	—	—
Ineffective drainage of floors (S.6) ....	—	—	—	—
Sanitary Conveniences (S.7)				
(a) Insufficient ..	2	2	—	—
(b) Unsuitable or defective ..	7	4	—	—
(c) Not separate for sexes ..	—	—	—	—
Other offences against the act (not including offences relating to Outworkers)...	—	—	—	—
TOTAL ....	9	6	—	—

All factories are entered in the register kept for the purpose. Number of Outworkers—13, employed in the making of wearing apparel and curtains. No action taken during the year.

## 11. Swimming Baths

There are no Public Swimming Baths in the District.

## 12. Movable Dwellings

Close supervision was maintained on camping sites and individual movable dwellings.

In addition to licences under the Public Health Act, movable dwellings require approval under the Town and Country Planning Act, 1947, which gives better control as regards amenity to the district than the Public Health Act. The Council have adopted the recommendations of the County Planning Officer on new camping sites which include the following:

“The use of the said property as a camping ground shall mean its use as pitches for:—

(i) tents covering an area not exceeding 100 sq. ft, each, or

(ii) caravans on wheels specially built for use as living accommodation and maintained in a fit state to be drawn or propelled on their own wheels on the public highway. No railway carriage, tram-car, omnibus body or other similar article, whether on wheels or not and howsoever adapted, shall be permitted to be stationed or erected on the said property.”

Many of the movable dwellings have had various unauthorised hut additions added, and measures were continued to have these removed or reduced to a modest size. Some progress has been made on these lines and some of the old fixed type huts and bus bodies have been removed.

The Council decided they would permit per caravan only one movable independent shed of up to 6ft. × 4ft. by 6ft. high (excluding closet accommodation) of good and neat construction.

N.B. It is recommended that special attention is given to *overcrowding* in “caravans” etc., also whether structurally they are fit for human habitation. *The appropriate Ministry should strengthen the Byelaws on the subject.* The Housing Act 1936-56 and the Public Health Act 1936 should be applied as required and where applicable.

### CAMPING SITES

Number of licences in operation, Public Health Act, 1936, Section 269:—

	<i>Year of 1956</i>
(a) For Camping Sites ....	19
(b) For fixed type dwellings sited on above Camping Sites ....	6
(c) For other individual movable dwellings ....	53
Estimated maximum number of Campers resident in the area at one time, during the summer season, 1956 ....	710



### 13. Insect Pests

No houses were found to be infested with bed bugs.

Other infestations dealt with were ants, wasps' nests, cockroaches and house flies.

#### MOSQUITOES

It has been found that two species of biting mosquitoes *Aedes Detritus* and *Theobaldia Annulata* breed on the tide-washed area between the Manchester Ship Canal and the Mersey. Further investigations revealed that large areas of the marsh extending over a large area along the canal and estuary had a sufficient salt content in the water to permit these mosquitoes to breed.

The Ministry of Agriculture, Fisheries and Food has been approached to see if any overall treatment could be carried out, meantime the users of the sludge lagoons have been requested to keep the adjacent ditches clean and free running.

The mosquito population causes most trouble following a wet summer, the flight range being at least 3 miles. They have not been shown to be the vectors of any particular disease, although the bites produce discomfort and may become septic.

I am indebted to Dr. F. S. Downing of the Technical Service Department of I.C.I. Ltd. for his assistance and advice on this problem.

### 14. Schools

The water supply is good and adequate, but repairs and improvements are required at many schools. Certain urgent maintenance repairs were asked for and carried out. Automatic flushing of urinals is required in some cases, also attention to dusty, badly surfaced playgrounds; pail closets should be fly-proof.

The County Medical Officer of Health, Cheshire, has reported on schools (in and outside) direct to the Director of Education, C.C.C.

### 15. Mortuaries

The mortuaries controlled by the Council at Frodsham and Stockton Heath are in a satisfactory condition.

## SECTION D—HOUSING

### 1. New Houses brought into the Rate Book in 1956

Number of new houses erected by Local Authority and brought into the Rate Book	....	....	....	....	31
Number of new houses erected by other bodies and persons and brought into the Rate Book	....	....	....	....	87
					<hr/>
Total	....	....	....	....	118
					<hr/>

				<i>New houses brought into the Rate Book 1956</i>		<i>No. of inhabited houses in Rural District 31st Dec. 1956.</i>
<i>Parishes</i>				<i>Total per Parish</i>		
				<i>Private</i>	<i>Local Authority</i>	
Alvanley	....	....	....	1	—	93
Antrobus	....	....	....	—	—	225
Appleton	....	....	....	10	15	1330
Aston	....	....	....	—	—	72
Budworth (Great)	....	....	....	—	—	119
Daresbury	....	....	....	1	—	83
Dutton	....	....	....	1	—	98
Frodsham	....	....	....	16	16	1716
Grappenhall	....	....	....	26	—	1842
Halton	....	....	....	—	—	460
Hatton	....	....	....	—	—	100
Helsby	....	....	....	15	—	943
Kingsley	....	....	....	3	—	372
Manley	....	....	....	1	—	155
Moore	....	....	....	3	—	177
Norley	....	....	....	1	—	290
Norton	....	....	....	—	—	41
Preston Brook	....	....	....	—	—	135
Stockton Heath	....	....	....	4	—	2329
Stretton	....	....	....	—	—	145
Sutton	....	....	....	3	—	236
Walton	....	....	....	2	—	519
Whitley	....	....	....	—	—	182
<b>TOTALS</b>				<b>87</b>	<b>31</b>	<b>11662</b>

## 2. Housing

Good progress was made on the further detailed inspection of unfit houses under the 5-Year Slum Clearance Programme.

Maps, schedules and other details on Clearance Areas were completed by October, and formal representations made to the Council.

The table set out opposite shows the progress made up to the end of the year.

Several owners of unfit houses have voluntarily undertaken not to relet the houses in their existing condition, once they are vacated, and subsequently to either demolish or recondition them to the Council's satisfaction.

Improvement grants were made for 26 houses, most of which were owner/occupied.

Many other houses have been inspected and the owners interviewed with regard to proposed applications for such grants. 40 reports on these preliminary inspections of properties were passed on to the Engineer & Surveyor who deals with the detailed applications and specifications.

No Certificates of Disrepair were granted or revoked in the year.

# ANALYSIS OF UNFIT HOUSES

FROM 1st SEPTEMBER, 1954, TO 31st DECEMBER, 1956

Parish	No. of Houses	Demolished	Vacant		Demolition Order or Agreement not to re-let but still occupied	Reconditioned or Improvements commenced	Clearance Areas
			Agreement not to re-let	Demolition Order			
Alvanley	2	-	-	-	2	-	-
Antrobus	6	-	2	1	-	1	-
Appleton	12	-	1	-	1	-	10
Aston	9	-	4	-	2	2	-
Budworth (Great)	7	2	1	-	-	1	-
Daresbury	-	-	-	-	-	-	-
Dutton	6	-	-	-	-	-	-
Frodsham	101	8	15	5	12	7	41
Grappenhall	17	3	9	1	4	1	-
Halton	3	-	-	-	2	-	-
Helsby	23	2	-	-	5	2	11
Hatton	6	-	-	1	1	-	-
Kingsley	24	2	-	-	6	3	-
Manley	1	-	-	-	-	1	-
Moore	4	-	-	-	-	-	-
Norley	6	1	-	-	1	-	-
Norton	-	-	-	-	-	-	-
Preston Brook	2	-	1	-	1	-	-
Stockton Heath	14	7	6	-	1	-	-
Stretton	11	1	1	3	3	1	-
Sutton	9	-	2	-	4	-	-
Walton	-	-	-	-	-	-	-
Whitley	17	-	1	4	1	1	-
Totals	280	26	43	15	46	20	62



# **CLEARANCE AREAS AND INDIVIDUAL UNFIT HOUSES YEAR ENDING 31st DECEMBER, 1956**

**Part A — Clearance Areas (Housing Act, 1936) — Nil.**

**Part B — Houses not included in Clearance Areas:**

	<i>Houses</i>	<i>Number of Persons displaced</i>	<i>Families</i>
<b>DEMOLITION AND CLOSING ORDERS</b>			
(1) Housing Act, 1936			
(a) Houses demolished as a result of formal or informal procedure under Section 11	13	28	12
(b) Houses closed in pursuance of an undertaking given by the owners under Section 11, and still in force	23	62	17
(c) Parts of buildings closed (Section 12)	—	—	—
(2) Housing Act, 1949			
(a) Closing Orders made under Section 3 (1)	—	—	—
(b) Demolition Orders determined and Closing Orders substituted under Section 3 (2)	—	—	—
(3) Local Government (Miscellaneous Provisions) Act 1953, Closing Orders made under Section 10 (1)	—	—	—
			<b>Number of Houses*</b>
<b>REPAIRS</b>			
	<b>Informal Action</b>		
(4) Number of unfit or defective houses rendered fit during the period as a result of informal action by the local authority under the Public Health or Housing Acts			33
	<b>Action under Statutory Powers</b>		
(5) Public Health Acts			
Number of houses in which defects were remedied after service of formal notices			
(a) by owners	....	....	0
(b) by local authority in default of owners	....	....	0
(6) Housing Act, 1936			
Number of houses made fit after service of formal notices (Sections 9, 10, 11 and 16)			
(a) by owners	....	....	0
(b) by local authority in default of owners	....	....	0
<b>Note:</b> *A defective house remedied more than once during the period should be included once only.			

### 3. Emergency Accommodation

All requisitioned properties have been released.

The converted ex-Army huts at Townfield Lane Camp, Frodsham, were demolished. Red Brow Camp, Preston Brook, is in the process of being demolished.

### 4. Housing Act, 1936—Part IV—Overcrowding

		1955	1956
(a)	i. Number of dwellings overcrowded at the end of the year ....	10	7
	ii. Number of families dwelling therein ....	14	10
	iii. Number of persons dwelling therein ....	68	53
(b)	i. Number of new cases of overcrowding reported during the year ....	4	3
(c)	i. Number of cases of overcrowding relieved during the year ....	4	6
	ii. Number of persons concerned in such cases	24	34
(d)	i. Particulars of any cases in which dwelling-houses have become overcrowded after the Local Authority has taken steps for the abatement of overcrowding ....	Nil	Nil

## SECTION E INSPECTION AND SUPERVISION OF FOOD

### 1. Milk and Dairies

Numbers on the registers are:—

Dairies	....	....	....	3
Distributors	....	....	....	28
Dealers	....	....	....	14
Supplementary	....	....	....	8

Samples taken were submitted to the Public Health Laboratory, Birkenhead, and comprise the following:—

	No. of samples	No. of samples unsatisfactory
Methylene Blue (keeping quality raw milks) ....	42	—
Phosphatase (Heat Treated Pasteurised Milks) ....	25	—
Turbidity (Heat Treated Sterilised Milks) ....	5	—
Of these samples number biological examination for the presence of Tubercle Bacilli ....	15	—
Number found to contain Tubercle Bacilli ....	—	—



## 2. Food Premises in Area

Grocer	....	....	....	....	....	52
Grocer and General Stores				....	....	39
Greengrocer	....	....	....	....	....	19
Sweets....	....	....	....	....	....	32
Butcher	....	....	....	....	....	21
Chemist	....	....	....	....	....	7
Fish and Chips	....	....	....	....	....	8
Wet Fish	....	....	....	....	....	4
Tripe	....	....	....	....	....	1
Cooked Meats	....	....	....	....	....	1
Cafe	....	....	....	....	....	12
Cafe with Shop	....	....	....	....	....	13
Licensed premises with Catering	....	....	....	....	....	18
Confectioners }						
Baker }	....	....	....	....	....	15
						<hr/> 242 <hr/>

Number of Food premises registered under Section 16, of the Food and Drugs Act, 1955:—

Ice-Cream —Sale only	....	....	....	....	84
Manufacture Hot Mix			....	....	1
Manufacture Cold Mix			....	....	2
				TOTAL....	<hr/> 87 <hr/>
Preserved Foods —Jam Factory	....	....	....	....	1
Sausage and Cooked Meats					17
Meat Pies	....	....	....	....	10
Fish and Chips	....	....	....	....	8
				TOTAL	<hr/> .... 36 <hr/>

260 Inspections were made at Registered premises.

No special educational activity was undertaken, such as, clean food guilds or lectures on food hygiene, but advice is given as and when required in the course of inspections.

## 3. Ice-cream

The hygiene of premises and personnel was satisfactory. Manufacture is only on a small scale one by hot mix and two by cold mix. All other registrations are for sale only.

Samples were taken which were graded as follows:—

Ice-Cream—Grade 1	....	....	....	20
Grade 2	....	....	....	0
Grade 3	....	....	....	0
Grade 4	....	....	....	0
Ice Lollies—Satisfactory	....	....	....	4

#### 4. Meat and Other Foods

The Public Health Inspectors act as Meat Inspectors.

During the year visits made in respect of Meat and Food Inspections were 44 in shops and 258 in slaughterhouses.

No Meat Marketing Scheme under Part III of the Public Health (Meat) Regulations, 1924, is in force in this district.

Three slaughterhouses are licensed, of which two are in regular use.

The quantity of food condemned in shops and canteens during the year was:—

						lbs.
Canned Meat	....	....	....	....	....	107
Canned Poultry	....	....	....	....	....	7
Canned Fruit....	....	....	....	....	....	76
Canned Vegetables	....	....	....	....	....	49
Canned Fish ....	....	....	....	....	....	8
Canned Soup....	....	....	....	....	....	4
Fruit ....	....	....	....	....	....	26
Milk ....	....	....	....	....	....	14
Jam ....	....	....	....	....	....	5
Fish ....	....	....	....	....	....	14
Pudding ....	....	....	....	....	....	3
Cheese ....	....	....	....	....	....	63
Beef ....	....	....	....	....	....	224
Potato Mash Powder	....	....	....	....	....	112
Cake Mixture	....	....	....	....	....	1
Oats ....	....	....	....	....	....	11
Rice ....	....	....	....	....	....	29
					TOTAL	753

## Carcases inspected and carcasses or parts condemned:

	<i>Cattle exclud- ing Cows</i>	<i>Cows</i>	<i>Cows slaughtered as reactors or under T.B. Order</i>	<i>Calves</i>	<i>Sheep and Lambs</i>	<i>Pigs</i>	<i>Horses</i>
Number killed ....	109	32	11	20	859	65	—
Number inspected ....	109	32	11	20	859	65	—
All diseases except tuberculosis. Whole carcasses condemned	—	1	—	—	4	—	—
Carcases of which some part or organ was condemned ....	11	6	—	—	15	4	—
Percentage of the No. inspected affected with disease other than tuberculosis ....	10.09%	21.88%	0.00%	0.00%	2.22%	6.16%	0.00%
Tuberculosis only. Whole carcasses condemned ....	—	—	3	—	—	—	—
Carcases of which some part or organ was condemned ....	1	2	8	—	—	2	—
Percentage of the No. inspected affected with tuberculosis ....	0.92%	6.25%	100%	0.00%	0.00%	3.08%	0.00%
<b>CYSTICERCOSIS</b> Carcases of which some part or organ was condemned ....	—	—	—	—	—	—	—
Carcases submitted to treatment by refrigeration ....	—	—	—	—	—	—	—
Generalised & totally condemned ....	—	—	—	—	—	—	—

## Meat and Edible Offals Condemed

The amount of meat and edible offals condemned was:—

For tuberculosis .... 2774 lbs.

For other causes .... 1326 lbs.

## Condemed Food Disposal

Meat and other foods are stained with a green dye and disposed of by burying deep in the Council's Refuse Tips.



## 5. Adulteration, etc. Food and Drugs Adulteration Act

I am indebted to the Chief Inspector of the Cheshire County Council for the following report of the work carried out by his department in the Runcorn Rural District under the Food and Drugs Act during the year 1956.

Samples obtained during the year ended 31st December, 1956.

<i>Name of Sample</i>	<i>No. obtained</i>	<i>Number adulterated or not up to the recognised standard of quality</i>
Boric Acid Ointment ....	1	—
Butter ....	1	—
Bread (White) ....	1	1
Cream ....	1	—
Camphorated Oil ....	1	—
Cut Peel ....	1	1
Cake ....	1	—
Custard Powder ....	1	—
Coconut, Desiccated ....	2	—
Fish Paste ....	2	—
Glycerine ....	1	—
Iodine ....	1	—
Jam ....	1	—
Lemon Curd ....	1	—
Milk ....	52	5
Milk Powder, Separated ....	1	—
Meat Pie ....	1	—
Margarine ....	1	—
Meat Paste ....	1	—
Mustard ....	1	—
Mincemeat ....	1	—
Nescafe ....	1	—
Olive Oil ....	1	—
Orange Squash ....	1	—
Pepper, White Ground ....	1	—
Raisins ....	1	—
Rum ....	2	—
Sweets ....	3	—
Salt ....	1	—
Tea ....	1	—
Vinegar, Malt ....	1	—
Whisky ....	1	—
Xmas Cake ....	1	—
Zinc Ointment ....	1	—
	<hr/> 90	<hr/> 7

### Particulars of Non-Standard Samples

<i>Sample</i>	<i>Result of Analysis</i>	<i>Remarks</i>
1. Milk (Channel Islands)	7.5% deficient in fat	Particulars sent to Ministry of Food in accordance with usual procedure. From 1st July, 1956, administration was taken over by Food and Drugs Authority.
2. White Bread ....	Contained oily matter and particles of rust and dirt.	Legal proceedings instituted but case dismissed on evidence of defendant company that the contamination was "an unavoidable consequence of the process of collection or preparation." (See Section 3 (3)) of the Food and Drugs Act, 1955.
3. Milk (Channel Islands)	20% deficient in fat	Bottle of milk sold by retailer as received from Dairy Company. Bottlers prosecuted and fined £2 and £1. 1s. costs. Sample taken in December Quarter, 1956. See remarks to No. 1 above.
4. Milk ....	3.5% deficient in non-fatty solids. Genuine but abnormal.	No action.
5. Milk ....	1.1% do.	No action.
6. Milk ....	2.3% do.	No action.
7. Cut Peel ....	Contained 135 p.p.m. sulphur dioxide instead of the 100 p.p.m. permitted by the Preservatives Regulations.	Manufacturer cautioned.

#### 6. Shell-Fish (Molluscan)

There are no Shell-fish beds in the area. Shell-fish are on sale regularly in the district. If Shell-fish, Mussels or Shrimps are eaten locally, they should be well cooked and should come from Government-controlled beds.

#### 7. Watercress

Only that as grown on properly controlled beds with a pure water supply and labelled should be sold and bought, otherwise there is a danger of intestinal disease spreading.

### SECTION F

#### PREVALENCE AND CONTROL OVER INFECTIOUS AND OTHER DISEASES

The prevailing varieties of notifiable disease during the year were mainly confined to Whooping Cough, Measles and Scarlet Fever.

### 1. Immunisation and Vaccination

Combined Diphtheria-Whooping Cough-Tetanus vaccine can now be given to infants at an early age (approx. 3 months) the results so far have been very good. This can be obtained free of charge by the patient's own Doctor; *I strongly recommend this.*

### 2. Diphtheria Immunisation

The *free scheme* is still available so that parents and guardians may have their children *properly* immunised against the deadly disease diphtheria.

*All* children one to fifteen years of age (*preferably* between the *sixth and ninth months*) should be properly immunised against diphtheria by two injections; in addition, a "booster" dose (one) is required in five years' time. This can be obtained *free of cost* through the parents' or guardians' own Doctor in the Surgery; also at Welfare Centres and Day Nurseries. Special Clinics are organised at schools as required. Application should be made at the Welfare Centres, Day Nurseries, Schools, or to the Public Health Department (Divisional).

Propaganda on the above has been *continuously* carried out aided by the Press and the Central Council for Health Education, etc, but still some children are found to have not been immunised.

*Parents or guardians should face up to their responsibilities and have their children properly immunised at once:*

**"PREVENTION IS BETTER THAN CURE."**

Further research is required into the "carrier" state of many diseases with a view to providing a cure for these, but preventive measures, e.g., Diphtheria and Whooping Cough Immunisation, Smallpox Vaccination, Inoculation against Typhoid Fever and other diseases will be necessary for many years where these diseases are likely to occur, or are prevalent; in addition proper hygiene and sanitation are essential.

As already recommended (via the Press, etc.), children should be vaccinated against Smallpox soon after birth, given Whooping Cough vaccine when about 3 months old and immunised against Diphtheria at about 8 months old.

Reference is made to B.C.G. vaccination against Tuberculosis in Appendix "A".

### 3. Care of the Blind

The welfare of Blind Persons was dealt with by the County Medical Officer of Health, Cheshire, under the provisions of the appropriate Act, working in conjunction with the Blind Welfare Societies, up to 5th July, 1948, and after this the same care continued under Section 28 of the National Health Service Act, 1946 (Divisional Health Committee.)



#### 4. Mental Deficiency and Special Schools for Defective Children

This was dealt with as required by the County Medical Officer of Health, Cheshire, and the appropriate Departments, etc., up to 5th July, 1948; after this further developments were carried out under the appropriate Acts.

#### 5. Ophthalmia Neonatorum

Cases of this disease are notified immediately to the County and local Divisional Medical Officer of Health.

#### 6. Prevention of Disease from Abroad

The Government under the appropriate Acts has a system of medical examination, etc., for those persons arriving in this country from abroad who have been in areas where serious infectious disease has occurred. All contacts are medically examined, given written and verbal instructions what to do if they feel ill, and the local Medical Officer of Health is notified of their arrival and he arranges for the necessary supervision. With the outbreaks of the serious type of smallpox abroad, it is again strongly recommended that all infants and others should be properly vaccinated according to the law on the subject; this can be carried out free of charge through the patient's own doctor.

#### 7. Infectious and Other Notifiable Diseases, 1956

<i>Disease</i>	<i>Age Groups of Cases Notified</i>									<i>Total</i>
	<i>Un- der 1</i>	<i>1 to 2</i>	<i>3 to 4</i>	<i>5 to 9</i>	<i>10 to 14</i>	<i>15 to 24</i>	<i>25 to 44</i>	<i>45 to 64</i>	<i>65 and over</i>	
Scarlet Fever ....	—	—	3	17	7	1	—	—	—	28
Measles ....	—	5	3	25	1	—	—	—	—	34
Whooping Cough	6	17	20	55	1	—	5	—	—	104
Pneumonia ....	—	—	1	2	1	—	1	1	5	11
Food Poisoning	—	—	—	—	1	—	—	3	—	4
Anterio Poliomyelitis	—	—	—	—	1	1	—	—	—	2
Acute Encephalitis	—	—	—	1	—	—	—	—	—	1
TOTALS ....	6	22	27	100	12	2	6	4	5	184

The most prevalent diseases were Whooping Cough, Measles and Scarlet Fever.

Tuberculosis notifications are given in a separate section of the report.

The Chester and District Hospital Management Committee have informed all general practitioners that they would be responsible for the supply of diphtheria antitoxin (free)—in emergency at the Runcorn Victoria Memorial Hospital (the Matron). In addition it can be obtained at any general hospital. Supplies can also be obtained (in emergency) from any infectious disease hospital, e.g., Warrington and Davenham.

Practitioners may, if they wish, obtain a small stock from a hospital in anticipation of requirements rather than wait until they need it for a particular case. (N.B.)

Stocks held by hospitals or practitioners should be returned three months before expiry date for exchange to the source of supply.

*In few diseases is prompt treatment as necessary as in diphtheria.*

*N.B. Antitoxin should be given in all suspicious cases at once, in the home or in the hospital. SWABBING IS ONLY AN AID TO DIAGNOSIS.*

Swabs are examined at the Public Health Laboratory, Birkenhead—in addition, as required, the laboratories at Chester and Warrington, free of charge (*this applies to all examinations carried out in the interests of Public Health*).

8. Causes of Death at different Periods of Life during the year 1956:

Cause of Death	AGE GROUP AND SEX												ALL AGE GROUPS					
	Under 1 year		1 to 4 years		5 to 14 years		15 to 24 years		25 to 44 years		45 to 64 years		65 to 74 years		75 years and over		M	F
	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F		
Tuberculosis: Respiratory .....	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	2	-	
Tuberculosis: Other forms .....	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	
Syphilitic Disease .....	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
Diphtheria: Meningococcal .....	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
Whooping Cough .....	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
Meningococcal Infections .....	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
Acute Poliomyelitis.....	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
Measles .....	-	-	-	1	-	-	-	-	-	-	-	-	-	-	-	-	1	
Other infective and parasitic diseases .....	-	-	-	-	-	-	-	-	1	-	-	-	-	-	-	2	-	
Malignant Neoplasm: Stomach .....	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	2	-	
Malignant Neoplasm: Lungs, Bronchus .....	-	-	-	-	-	-	-	-	-	-	9	1	5	1	1	14	3	
Malignant Neoplasm: Breast .....	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	8	
Malignant Neoplasm: Uterus .....	-	-	-	-	-	-	-	-	-	-	11	-	-	6	-	-	-	
Other malignant and lymphatic neoplasms .....	-	-	-	-	-	-	1	-	-	-	-	-	-	-	-	26	18	
Leukaemia; Aleukaemia .....	-	-	-	-	-	-	-	-	1	-	-	-	-	-	-	1	-	
Diabetes .....	-	-	-	-	-	-	-	-	-	2	8	-	-	-	-	1	1	
Vascular lesions of nervous system .....	-	-	-	-	-	-	-	-	-	-	17	5	3	19	19	28	36	
Coronary Disease Angina .....	-	-	-	-	-	-	-	-	-	-	1	6	1	2	10	57	20	
Hypertension with Heart Disease.....	-	-	-	-	-	-	-	-	-	-	2	6	5	15	2	2	3	
Other Heart Disease .....	-	-	-	-	-	-	-	-	1	-	2	6	6	8	25	21	36	
Other Circulatory Disease .....	-	-	-	-	-	-	-	-	-	-	2	6	2	2	9	12	22	
Influenza .....	-	-	-	-	-	-	-	-	-	-	1	-	2	3	2	1	4	
Pneumonia .....	1	-	-	-	-	-	-	-	-	-	1	-	-	1	4	5	6	
Bronchitis .....	1	-	-	-	-	-	-	-	-	-	4	-	-	6	1	14	3	
Other Respiratory Diseases .....	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	3	-	
Ulcer of Stomach and Duodenum .....	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	3	
Gastritis, Enteritis and Diarrhoea .....	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	4	-	
Nephritis and Nephrosis .....	-	-	-	-	-	-	-	-	-	-	1	-	-	-	-	4	-	
Hyperplasia of Prostate .....	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	2	-	
Pregnancy: Childbirth, abortions .....	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	2	
Congenital Malformations .....	2	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	16	
Other defined and ill-defined diseases .....	3	3	-	-	-	-	-	-	-	-	3	1	3	-	-	20	2	
Motor Vehicle Accidents .....	-	-	-	1	-	-	-	-	-	-	2	1	1	-	-	6	4	
All other Accidents.....	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	2	2	
Suicide .....	-	-	-	-	-	-	-	1	-	-	-	1	-	-	-	1	-	
Homicide and Operations of War .....	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
ALL CAUSES .....	8	4	-	2	1	1	3	1	8	6	63	40	60	45	89	232	207	



					<i>Males</i>	<i>Females</i>
Deaths of Infants under 1 year	{	Total	....	....	9	4
		Legitimate	....	....	7	4
		Illegitimate	....	....	2	0
Live Births	{	Total	....	....	275	248
		Legitimate	....	....	267	237
		Illegitimate	....	....	8	11
Stillbirths	{	Total	....	....	3	2
		Legitimate	....	....	2	2
		Illegitimate	....	....	1	0

POPULATION.....37,080 (estimated mid-year Home Population)  
 Comparability Factors.....Births 1.05; Deaths 0.99

**BIRTH RATES, DEATH RATES, ANALYSIS OF MORTALITY,  
 MATERNAL MORTALITY AND CASE RATES FOR  
 CERTAIN INFECTIOUS DISEASES IN THE YEAR 1956**  
 Provisional figures based on Quarterly Returns

							<i>Runcorn Rural District</i>	<i>England and Wales</i>
							<i>Rates per 1,000 Home Population</i>	
<b>BIRTHS—</b>								
Live births	....	....	....	....	....	....	14.10	15.7
Stillbirths	....	....	....	....	....	....	9.56	23.0(a)
<b>DEATHS—</b>								
All causes	....	....	....	....	....	....	11.84	11.7
<b>NOTIFICATIONS (corrected)—</b>								
Typhoid Fever	....	....	....	....	....	....	0.00	0.00
Paratyphoid Fever	....	....	....	....	....	....	0.00	0.01
Meningococcal Infection	....	....	....	....	....	....	0.00	0.02
Scarlet Fever	....	....	....	....	....	....	0.75	0.74
Whooping Cough	....	....	....	....	....	....	2.81	2.07
Diphtheria	....	....	....	....	....	....	0.00	0.00
Erysipelas	....	....	....	....	....	....	0.00	0.09
Smallpox	....	....	....	....	....	....	0.00	0.00
Measles	....	....	....	....	....	....	0.92	3.34
Pneumonia	....	....	....	....	....	....	0.29	0.57
Acute Poliomyelitis (including Polioencephalitis)								
Paralytic	....	....	....	....	....	....	0.05	0.03
Non-paralytic	....	....	....	....	....	....	0.00	0.03
Food Poisoning	....	....	....	....	....	....	0.10	0.25
Puerperal Pyrexia	....	....	....	....	....	....	0.00	16.45(a)
							<i>Rates per 1,000 Live Births</i>	
<b>DEATHS—</b>								
All causes under 1 year of age	....	....	....	....	....	....	24.85	23.8

(a) Per 1,000 Total (Live and Still) Births

## 9. Tuberculosis

No person employed in the milk trade was found suffering from Pulmonary Tuberculosis, nor was it found necessary compulsorily to remove to hospital any person suffering from Tuberculosis.

For the prevention of this disease, the following precautions should be noted:—

A properly balanced diet, in addition early diagnosis (X-ray, etc.), proper treatment, *thorough* disinfection of homes when cases go to a sanatorium, separate rooms and utensils, frequent visits by Health Visitors, and as required by the Medical Officer of Health and Sanitary Inspectors. All new cases are specially investigated by me and reported to me as Divisional Medical Officer of Health (as required to H.M. Inspector of Factories). Close liaison is kept with the Chest Physicians. Follow-up of contacts and the patients by the Health Visitor is carried out very thoroughly and action taken as required by myself and the Chest Physician (Divisional Health). The Mass X-ray Units are proving useful in detecting early cases of Tuberculosis, etc. “Specified” areas are increasing in which only heat-treated or tuberculin-tested milk can be sold; this is important.

Medical officers in charge of industrial hygiene, etc., factory inspectors, form a valuable liason in preventing and ascertaining the cause of tuberculosis (e.g., dust, working conditions, disinfections, cleanliness, etc.). The Public Health Act, 1936 (Section 287) proves useful to the Medical Officer of Health (and Public Health Inspectors) allowing power of entry to any premises for the general purpose of the Act, in conjunction with those concerned.

*In my opinion, all milk, especially for children, should be properly heat-treated (e.g., pasteurised or sterilised); failing this, heat-treated in the home.*

*With proper veterinary control of cattle, proper housing conditions and food for the people, these, with heat-treatment of milk (e.g., pasteurisation, etc., or proper heat-treatment in the home), will help to stamp out this terrible disease. Proper heat-treatment of milk not only kills tubercle bacillus but other germs causing disease.*

A thorough disinfection (steam, etc.) of the house, clothing, etc. with a *thorough* “spring-clean” of the house when a case is admitted to hospital, *is essential*. Isolation of contacts (*especially* children) is most essential and every endeavour is made to do this. B.C.G. injections are given by the Chest Physician in suitable cases. Chalets, extra beds and bedding are supplied as and when required, via the Divisional Health Department.

Particulars of the 28 new cases of tuberculosis and of the 3 deaths from the disease in the area during 1956:—



Age Periods	New Cases				Deaths			
	Respiratory		Non- Respiratory		Respiratory		Non Respiratory	
	M.	F.	M.	F.	M.	F.	M.	F.
0-1 .....	—	—	—	—	—	—	—	—
1-4 .....	—	—	—	—	—	—	—	—
4-14 .....	—	1	1	—	—	—	—	—
15-24 .....	3	—(3)	—	1	—	—	—	—
25-34 .....	2(2)	2(1)	—	—	—	—	—	—
35-44 .....	1	1	—	—	—	—	—	—
45-54 .....	2	2	—	1	—	—	—	—
55-64 .....	2	—	1	—	—	—	—	—
65 upwards	—(1)	1	—	—	2	—	1	—
TOTALS .....	13	11	2	2	2	—	1	—

3 Deaths were Notified Cases.

Figures in brackets relate to cases transferred from another district

Specimens of sputum from suspected Pulmonary Tuberculosis patients are examined at the Public Health Laboratory, Birkenhead, also Warrington and Chester Royal Infirmary laboratories.

Tuberculosis cases on register. Comparative rates:—

Year	Estimated Population	Pulmonary		Non- Pulmonary		Total all Forms	No. per 1,000 of Population
		M.	F.	M.	F.		
1946	32,760	68	44	34	34	180	5.49
1947	32,930	60	42	29	32	163	4.95
1948	34,230	59	44	28	33	164	4.79
1949	34,550	62	37	31	34	164	4.74
1950	35,580	74	48	29	35	186	5.22
1951	35,510	79	55	25	34	193	5.43
1952	35,520	89	61	29	33	212	5.97
1953	35,800	93	67	27	30	217	6.06
1954	36,260	86	68	22	23	199	5.48
1955	36,810	91	63	20	20	194	5.02
1956	37,080	101	69	19	22	211	5.69

## 10. Cancer Research

The Department is still co-operating in the survey being carried out under the auspices of Dr. Percy Stocks, lately Chief Medical Statistician, General Register Office, into recent cancer deaths on Merseyside. Investigations into cancer deaths, i.e., analytical research is being carried out in conjunction with the Department of Agricultural Chemistry (B.E.C.C.), Memorial Buildings, Deiniol Road, Bangor, Caernarvonshire.



During the year there were 74 deaths recorded from cancer as compared with 59 in 1955. These figures were equivalent to 2.00 and 1.60 per 1,000 of the population respectively.

### Details of Cancer Deaths over the Past Five Years

Year	Site	1-14	15-44	45-64	65-74	75 and over	Rate per 1,000 population	Total all ages	
								M.	F.
1952	Stomach	—	—	6	1	2	1.63	4	5
	Lungs, Bronchus	—	1	6	3	—		7	3
	Other Sites	—	1	11	16	11		18	21
1953	Stomach	—	—	5	6	1	1.67	10	2
	Lungs, Bronchus	—	1	5	4	1		8	3
	Other Sites	—	2	13	7	15		20	17
1954	Stomach	—	1	2	5	7	1.62	9	6
	Lungs, Bronchus	—	1	4	—	—		5	—
	Other Sites	—	5	11	12	11		19	20
1955	Stomach	—	—	1	3	4	1.60	4	4
	Lungs, Bronchus	—	3	4	1	2		8	2
	Other Sites	—	2	15	17	7		17	24
1956	Stomach	—	—	—	5	8	2.00	2	11
	Lungs, Bronchus	—	—	10	5	2		14	3
	Other Sites	—	1	14	14	15		26	18

Under Section 76 of the National Health Service Act, 1946, Sections 1, 2 and 6 and sub-sections (2) and (3) of Section 8 of the Cancer Act, 1939, were repealed and the responsibility for the provision of an adequate cancer service was placed on the Minister and Regional Hospital Boards by Part II of the National Health Service Act of 1946.

Facilities for cancer diagnosis and treatment are available in all major general hospitals in the area and the radiotherapeutic work in the region is centred at the Liverpool Radium Institute. Follow-up clinics are undertaken at the Chester Royal Infirmary.

The areas of the Runcorn Rural District Council and the Runcorn Urban District Council are within the area of the Liverpool Regional Hospital Board.

**ANNUAL REPORT OF CANAL BOAT INSPECTOR 1956**

In accordance with Section 249 (3) of the Public Health Act, 1936, I beg to report as follows:—

No canal boats were inspected during the year 1956.

Several visits were made to the canals, but as reported in recent years road transport has superseded canal transport, as regards wharves in this district. A few boats continue to pass through the district.





*Appendix "A"*

CHESHIRE COUNTY COUNCIL

RUNCORN DIVISIONAL HEALTH COMMITTEE

REPORT  
FOR THE YEAR  
1956

By the

DIVISIONAL MEDICAL OFFICER OF HEALTH

Presented to the  
Runcorn Divisional Health Committee  
19th March, 1957

## MEMBERS OF THE RUNCORN DIVISIONAL HEALTH COMMITTEE

### Chairman:

COUNCILLOR H. GOODALL

### Deputy Chairman:

COUNCILLOR H. JACKSON

### Representatives of Local Health Authority

County Alderman G. ASTBURY,	Chairman, County Health Committee
„ Councillor A. WHITLEY,	Vice-Chairman, County Health Committee
Alderman W. GITTINS,	
County Councillor H. MANN	
„ „ A. E. MOORS	
„ „ R. E. PAYTON	
„ „ Miss M. J. PREECE	

### Runcorn Rural District Council Representatives

Councillor D. L. DAVIES	Councillor J. W. KIRKHAM
„ Mrs. K. I. DEWES	„ T. L. LOOKER
„ Mrs. T. A. GLOVER	„ Mrs. E. STANSFIELD
„ J. HUNT	„ G. S. WALLWORTH

### Runcorn Urban District Council Representatives

Councillor C. J. HELSBY	Councillor J. G. POTTS
„ S. HOLT	„ T. B. SHALLCROSS
„ T. H. LEATHER	„ A. WOOD

### Co-opted Members

Dr. E. R. CARTER Local Medical Committee for the County Palatine of Chester  
 Dr. E. WARDLE, National Health Service, Local Dental Committee  
 Miss T. E. DUDLEY, Cheshire County Nursing Association  
 Councillor W. S. HUXTABLE, Runcorn Divisional Executive for Education  
 Councillor W. H. STUBBS, Chester & District Hospital Management Committee  
 Mrs. C. EVANS  
 Mrs E. A. ROYLE  
 Mr J. D. WHITLEY

### Officers

*Clerk to the Committee:* Mr. T. J. Lewis

*Divisional Medical Officer:* E. N. Hillman Gray, L.R.C.P. & S., L.M., D.P.H.

**CHESHIRE COUNTY COUNCIL  
RUNCORN DIVISIONAL HEALTH COMMITTEE**

**ANNUAL REPORT OF THE  
DIVISIONAL MEDICAL OFFICER OF HEALTH  
FOR THE YEAR 1956**

**INTRODUCTION**

**TO THE CHAIRMAN AND MEMBERS OF THE  
RUNCORN DIVISIONAL HEALTH COMMITTEE**

Mr. Chairman, Ladies and Gentlemen:

I have the honour to present this my Annual Report dealing with those portions of the Sections of Part III of the National Health Act, 1946, for which this Committee is responsible.

As in previous years the report is sub-divided into the various sections of the Act and gives details of the work carried out during the year.

With the exception of the Antrobus Clinic, the Welfare Centres in the Division were well attended and at the Day Nursery there was an increase of 2 in the average daily attendance, as compared with the previous year.

One new selling point for the distribution of Welfare Foods was opened during the year at Appleton.

The ambulance service operated smoothly during the year, and further reductions were made in the number of journeys and the mileage.

Every effort was again made to give publicity to the need for vaccination against smallpox and immunisation against diphtheria and whooping cough.

The scheme for the registration of children for vaccination against Poliomyelitis commenced in March, and 2,718 children were registered in the Division. During the year 303 children received two injections, and 17 one injection.

The scheme of B.C.G. Vaccination was continued during the year, and it is pleasing to note that 80% of parents consented to their children being vaccinated.

The demand on the domestic help service continued to increase, particularly on account of the number of aged persons requiring the services of a domestic help whose need for help continues indefinitely. In view of the demand on the Hospital Authorities for admission of chronic sick patients to hospital, this service is most valuable in helping to look after the old people in their homes for as long as is possible. During part of the year there was a shortage of domestic helps to attend cases, particularly in the Grappenhall area, but during the last few weeks the position improved.



My thanks are due to the Chairman and Members of the Divisional Health Committee for their support and help to me on all occasions.

The co-operation and assistance of the County Medical Officer and his staff, the Clerk to the Divisional Health Committee, and also the staff in my Divisional Health Office, Matron, Day Nursery (Mrs. E. Jones, S.R.N.), Health Visitors; District Nurses; Midwives, local General Practitioners (Urban and Rural); Dr. L. Hughes, S.A.M.O. (Liverpool Regional Hospital Board); and the Ambulance Supervisor, has been *greatly appreciated* by me in the carrying out of my various duties since the Divisional Scheme came into being in 1948.

I beg to remain,

Your obedient Servant,

*Divisional Health Office,  
36 Halton Road, Runcorn.  
March, 1957.*

E. N. HILLMAN GRAY

## SECTION 22

### CARE OF MOTHERS AND YOUNG CHILDREN

There are eight child Welfare Centres in the Division, three of which are held in County owned premises (Runcorn, Frodsham and Stockton Heath) and five of which are held in premises rented by the County Council for the actual Sessions (Antrobus, Grappenhall, Helsby, Kingsley and Weston Point).

The Infant Welfare Centres are as follows:—

Antrobus	Parish Hall	First and Third Wednesdays of each month at 2 p.m.
Frodsham	Welfare Centre, The Rock	Alternate Tuesdays at 2 p.m.
Grappenhall	Methodist Sunday School	Tuesdays at 2 p.m.
Helsby	British Insulated Callenders' Cables Works Recreation Room	Alternate Tuesdays at 2 p.m.
Kingsley	Hurst Chapel	Second and Fourth Wednesdays at 2 p.m.
Runcorn	Welfare Centre Halton Road	Wednesdays 10 a.m. and 2 p.m.
Stockton Heath	Welfare Centre 65 Whitefield Road	Mondays 2 p.m.
Weston Point	Conservative Hall	First and Third Thursdays of month at 2 p.m.

In view of the continued small attendances at the Antrobus Child Welfare Centre, it was decided by the Committee that the Centre should be closed as from 31st December, 1956.

In addition to Infant Welfare Clinics, Orthopaedic, Ophthalmic, Dental and Minor Ailments Clinics are held at the Frodsham, Runcorn and Stockton Heath centres during the month, and at Runcorn, Ante- and Post-Natal Clinics are also held each Thursday at 10 a.m. A Toddlers Clinic on the first Thursday of the month, and Physiotherapy and Speech Therapy Clinics are held during the month. A Speech Therapy Clinic is now held each Thursday at the Stockton Heath Welfare Centre.

A Mobile Physiotherapy Clinic, arranged by the Chester and District Hospital Management Committee, was commenced at the Welfare Centre, Runcorn, on 19th November, 1956. Only patients referred to the Clinic by a Specialist at a Hospital can attend for treatment at this Clinic.

The Committee inspected the Welfare Centres at Runcorn, Frodsham and Stockton Heath, and the Day Nursery, Runcorn, on the annual inspection of County owned and rented properties, and attention was given to alterations, repairs and replacements required. Work on the lay-out of the gardens at the Runcorn Welfare Centre was completed during the year.

### Day Nursery

There is one Day Nursery in the Division, situated in Okell Street, Runcorn. The Matron and staff have again to be congratulated on their excellent work.

During the year the average daily attendance of the Nursery was 28, an increase of 2 on the previous year.

Attendances at the various clinics held at the Welfare Centres and for the Day Nursery are given in the following tables:

#### A. MOTHERS' CLINICS

				<i>New Cases</i>	<i>Total Attendances</i>
Ante-natal	....	....	....	153	630
Post-natal	....	....	....	—	—
Dental:—					
Pre-natal	....	....	....	21	45
Nursing mothers		....	....	64	194
Dentures supplied		....	....		44

#### B. YOUNG CHILDREN'S CLINICS

(i) <i>Infant welfare</i>				<i>New Cases</i>	<i>Total Attendances</i>
To 1 year	....	....	....	693	6707
1 to 2 years		....	....	—	1025
2 to 5 years		....	....	—	960
(ii) <i>Specialist</i>					
Ophthalmic (under 5)	....			25	63
Dental treatment (under 5)				54	77

**B. (i) Welfare Centres**

	<i>New Cases</i> 0—1	<i>Total Attendances</i>		
		0—1	1—2	2—5
Antrobus .....	11	81	51	68
Frodsham .....	82	809	123	161
Grappenhall .....	115	1349	119	98
Helsby .....	45	637	141	115
Kingsley .....	22	180	75	107
Runcorn .....	243	2082	342	368
Stockton Heath .....	121	1181	91	34
Weston Point .....	54	388	83	9
<b>TOTALS</b> .....	<b>693</b>	<b>6707</b>	<b>1025</b>	<b>960</b>

**B. (ii) Ophthalmic Clinics**

						<i>New Cases</i>	<i>Total Attendances</i>
Frodsham .....	....	....	....	....	....	4	17
Runcorn .....	....	....	....	....	....	10	25
Stockton Heath .....	....	....	....	....	....	11	21
<b>Totals</b> .....	....	....	....	....	....	<b>25</b>	<b>63</b>

**(iii) Day Nursery, Runcorn**

						<i>Average No. Attending</i>	<i>Total Attendances</i>
Age 0—2 years .....	....	....	....	....	....	6	1708
2—5 years .....	....	....	....	....	....	22	5367

**SALE OF BRANDED WELFARE FOODS** — The sale of proprietary brands of Welfare Foods at Antrobus, Kingsley, Runcorn and Weston Point is carried out through my office. During the year the total sales amounted to £668. 10s. 7d.

At the Frodsham, Helsby, Grappenhall and Stockton Heath Clinics, the sale of Welfare Foods is carried out by Voluntary Societies.

**DISTRIBUTION OF WELFARE FOODS — M.O.F.** — During the year one new distribution point was opened in the Division at the following address:—

“Springfield”, Arley Lane, Appleton—on 13th August, 1956.

The following are details of the distribution points and commodities sold during the year.



<i>Centre</i>	<i>Commodities</i>				
	<i>N.D. Milk</i>	<i>Half Cream</i>	<i>Cod Liver Oil</i>	<i>A. &amp; D. Capsules</i>	<i>Orange Juice</i>
Runcorn ....	11501	402	2449	1034	14870
Alvanley ....	227	—	51	7	379
Antrobus ....	58	1	72	23	349
Appleton ....	280	—	37	11	295
Frodsham ....	3064	97	628	370	4736
Grappenhall ....	1016	—	365	162	2578
Halton ....	244	—	197	31	856
Helsby ....	862	21	277	154	2419
Kingsley ....	399	—	126	25	663
Manley ....	189	—	47	21	280
Moore ....	547	—	97	24	759
Norley ....	185	—	81	6	403
Preston Brook ....	311	—	137	37	547
Stockton Heath ....	1389	1	418	178	2925
Sutton Weaver ....	141	—	18	1	150
Thelwall ....	64	—	35	6	167
Weston ....	877	—	126	33	904
Weston Point ....	2214	—	475	144	2531
Whitley ....	335	—	85	1	430
TOTAL ISSUES: ....	23903	522	5721	2268	36241
Issues to Institutions ....	6	NIL	108	NIL	432
TOTALS FOR DIVISION: ....	23909	522	5829	2268	36673

### SECTION 23 — MIDWIFERY

Under this section the Committee are responsible for:—

- (i) Provision, where necessary, of accommodation for midwives and the maintenance, repair and alterations required for such premises.
- (ii) Provision of transport for midwives where necessary in cases of emergency.

Apart from the Midwives residing in No. 10 Stanley Villas No. 30 Heath Road Crescent, Runcorn, and No. 10 Cedar Avenue, Stockton Heath, all other County Midwives in the Division reside in property under arrangements made by themselves, and for which this Committee have no responsibility with regard to repairs, etc.

During the year the Committee inspected the County owned and rented midwives' property, and repairs requiring attention were dealt with.

Transport and medical requisites were provided as and when required.

The Midwives are doing good work in the homes where home confinements are required.

## **SECTION 24 — HEALTH VISITING**

The Committee are also responsible for housing accommodation for Health Visitors, but with the exception of the Health Visitor who has taken up the accommodation of the first floor flat at No. 10 Stanley Villas, Runcorn, all Health Visitors in the Division reside in property under arrangements made by themselves and for which this Committee have no responsibility with regard to repairs, etc.

In view of the development of housing estates taking place in the Appleton and Grappenhall areas of the Division, the Committee asked the County Health Committee to reconsider their decision regarding the appointment of an additional Health Visitor for this district, and I am pleased to report that the County Health Committee agreed to the appointment of an additional Health Visitor, which is urgently required.

The Health Visitors are to be congratulated on their good “all round” work in the homes, Welfare Centres, etc.

## **SECTION 25 — HOME NURSING**

With the exception of the two district nurses in Runcorn and one District Nurse/Midwife at Budworth and Helsby who reside in properties under arrangements made by themselves and for which this Committee have no responsibility, the remainder now reside in County owned or rented property.

The Committee inspected all County owned or rented property in the Division, and action was taken regarding any alterations, repairs or renewals requiring attention.

The District Nurses provide good service to all in the homes, working in co-operation with the various General Practitioners.

## **SECTION 26 — VACCINATION AND IMMUNISATION**

Every effort has again been made during the year to bring to the notice of parents and guardians the necessity of having their children vaccinated against smallpox and immunised against diphtheria and whooping cough.

Publicity has been given to this subject by posters, periodic advertisements in the local Press, and the Health Visitors have discussed the question with mothers when making their home visits. Reminders have also been sent to parents from my office.



Special immunisation sessions were held by me at schools in the Division, 54 children being given primary injections and 261 reinforcing injections.

There was a slight increase in the number of children vaccinated against smallpox and immunised against whooping cough, but a very small reduction in the number of children immunised against diphtheria as compared with the previous year.

The figures set out in the following tables, compiled from record cards received from medical practitioners, show the number of vaccinations and immunisations carried out during the year. For comparison purposes, the figures for the previous year are also given.

### Vaccination

				<i>Welfare Centres</i>	<i>Doctor's Surgery</i>	<i>Patients' Homes</i>	<i>Total</i>
Primary	....	1956		82	350	47	479
		1955		98	295	43	436
Re-vaccination	....	1956		2	67	3	72
		1955		1	63	6	70

### Immunisation — Primary

				<i>Welfare Centres</i>	<i>Doctor's Surgery</i>	<i>Patients' Homes</i>	<i>School Clinic</i>	<i>Total</i>
Diphtheria	....	1956		4	56	3	54	117
		1955		—	102	2	73	177
Whooping Cough	....	1956		—	1	1	—	2
		1955		3	26	1	—	30
Combined Whooping Cough/Diphtheria		1956		209	478	65	—	752
		1955		248	437	27	—	712

### Immunisation — Reinforcing Injections

Diphtheria	....	1956		13	86	1	261	361
		1955		17	75	2	318	412
Whooping Cough	....	1956		—	—	—	—	—
		1955		—	1	—	—	1
Combined Whooping Cough/Diphtheria		1956		22	65	6	—	93
		1955		19	30	9	—	58

### VACCINATION AGAINST POLIOMYELITIS

Early in the year the Ministry of Health introduced the scheme for the Vaccination of children against poliomyelitis; 2,718 children were registered in this Division, and during the year 303 children received two injections, and 17 one injection.



## SECTION 27 — AMBULANCE AND TRANSPORT SERVICE

The Ambulance Service has operated quite smoothly during the year, and it is interesting to note that although there was an increase of 1,066 in the number of patients conveyed to hospital, there was a reduction of 251 in the number of journeys made, and of 85 miles in the total mileage for the service during the year.

In June, 1956, an additional Clinic Ambulance XBM 258, was supplied to this Division, and this has resulted in a reduction of journeys being given to contractors, and is also responsible for the reductions in journeys and mileage mentioned above.

A new Bedford Ambulance XMB 268 was supplied in October, 1956, as a replacement for Commer Ambulance MTU 731 which is to be transferred to Civil Defence.

During the year one driver resigned to take up a similar appointment with the West Riding Ambulance Service, and a driver/mechanic was appointed to fill the vacancy on the establishment.

With the supply of an additional clinic ambulance, it was found that the establishment of personnel was insufficient to man all the vehicles during the peak period of the day, and the Committee made a strong recommendation to the County Health Committee for the establishment to be increased by one driver/attendant, to which they agreed.

One driver received a bar to his 5 years' driving medal, and 10 drivers one year safe driving diplomas for the National Safe Driving Competition, 1955, and 12 drivers passed their First Aid Examination during the year.

**Details of Journeys carried out Direct by Ambulance Station**

	<i>Morris FLG 492</i>	<i>Bedford PTU 296</i>	<i>Bedford XMB 268</i>	<i>Commer MTU 731</i>	<i>Bedford Clinics</i>			<i>Total for Stn.</i>
					<i>TLG 538</i>	<i>TMA 444</i>	<i>XMB 258</i>	
Emergencies	68	240	82	38	37	62	59	586
Maternity ....	11	207	43	7	14	12	28	322
Accidents ....	10	83	22	5	3	4	6	133
Ord. Removals	202	132	29	95	47	59	77	641
Sitting Cases	1382	395	57	1211	1730	1866	1174	7815
Infectious Diseases	6	4	1	16	9	10	4	50
Total Patients	1679	1061	234	1372	1840	2013	1348	9547
Total Journeys	540	781	185	514	732	819	480	4051
Mileage ....	15371	17616	4950	13523	24876	29631	17513	123480
Petrol: galls.	1451½	1252½	368½	1211	1067½	1271½	788½	7411
Oil: pints ....	148	160½	43½	147	197½	227	46½	970
Average M.P.G.	10.7	14.1	13.7	11.3	23.6	23.7	22.4	16.8

### Details of Journeys Carried Out by Contractors

	<i>Total No. Journeys</i>	<i>No. of Patients</i>	<i>No. of Accident and Emergency Journeys</i>	<i>Total Mileage</i>
Ambulance ....	58	60	58	982
Cars ....	927	1558	2	23178

Details of all journeys made during the year as compared with the previous twelve months are as follows:

	<i>Journeys</i>	<i>Patients</i>	<i>Emergencies</i>	<i>Mileage</i>
Ambulance Journeys:				
1956	2078	4406	874	52442
1955	2344	3807	999	58082
Sitting Case Journeys:				
1956	2958	6759	227	95198
1955	2943	6292	194	89642
Total all Journeys:				
1956	5036	11165	1101	147640
1955	5287	10099	1193	147725
Increase: ....	—	1066	—	—
Decrease: ....	251	—	92	85

The majority of patients in the Division requiring transport attend hospitals in Chester, Liverpool and Warrington, and the average mileage per journey for the year was 29.3 compared with 27.9 for the previous year.

The arrangements between the County Council and the Warrington Corporation, whereby the latter supplied ambulances for the conveyance of non-infectious cases from Stockton Heath and the surrounding district, were continued during the year.

The alterations to the Ambulance Station were completed and the staff moved to their new quarters.

## SECTION 28

### PREVENTION OF ILLNESS, CARE AND AFTER-CARE

#### Tuberculosis

The Health Visitors were informed of all new cases and asked to visit and complete the environmental report sheet, and where the contacts of the patients had not attended the Chest Clinic for examination, they were advised to do so. Every effort has been made to persuade the contacts to attend for examination.



On receipt of the completed report sheets, these were carefully investigated by me, and where the housing conditions of the patients were such that it was advisable that they should be rehoused, the question was taken up with the Housing Departments of the Urban and Rural District Councils, and I am very pleased to report that both Councils again gave their sympathetic consideration to the rehousing of these cases, and in a large number of cases they were able to rehouse the families. Where the housing accommodation was adequate the patients were strongly advised to occupy separate bedrooms, and in all cases advice was given on the precautions to be taken to prevent the spread of infection. Advice was also given to patients on how to obtain extra nourishment and assistance.

In all cases, enquiries were made to see whether it was possible to find the cause of infection.

The chest physicians at the Runcorn and Warrington Chest Clinics tested the child contacts of cases, and during the year 15 B.C.G. Vaccinations were given in this connection.

When patients were admitted to Hospital, arrangements were made for a full disinfection of the premises to be carried out.

During the year a careful check was made with the Chest Physicians of all patients whose names appear on my Tuberculosis Register and after examination it was possible to remove the names of a few patients from such register.

Details of cases during the period 1st January to 31st December, 1956, are as follows:

	<i>Pulmonary</i>		<i>Non-Pulmonary</i>		<i>Total</i>
	<i>M.</i>	<i>F.</i>	<i>M.</i>	<i>F.</i>	
(a) Total number of cases on register—					
1st January, 1956 .....	158	119	23	22	322
31st December, 1956 .....	169	127	21	25	342
(b) Removals from register, 1st January to 31st December, 1956—					
Died .....	6	1	—	—	7
Left district .....	1	5	1	—	7
Recovered .....	1	2	2	1	6
Lost sight of .....	—	—	1	—	1
	8	8	4	1	21
(c) Number of notifications received, 1st January to 31st December, 1956—					
New cases .....	13	8	2	3	26
Transfers .....	6	8	—	1	15
Restored to register .....	—	—	—	—	—
	19	16	2	4	41



## B.C.G. Vaccination

During the year parents of children in the 13 years age group attending schools in the Division were given the opportunity of having them given B.C.G. Vaccination, and I am pleased to report that there was a very good response, approximately 80% agreeing to the vaccination of their children.

The following schools were visited during the period under review:

Balfour Road Secondary Modern School, Runcorn.  
 Holy Trinity C. of E. School, Runcorn.  
 Parish C. of E. School, Runcorn.  
 St. Edwards R.C. School, Runcorn.  
 Halton C. of E. School.  
 Helsby County Grammar Schools (Girls and Boys).  
 Helsby Secondary Modern School.  
 Frodsham Secondary Modern School.  
 Kingsley Secondary Modern School.  
 Stockton Heath Secondary Modern School.  
 Stockton Lodge Private School, Stockton Heath  
 Marlfield Private School, Grappenhall.  
 Belmont College, Gt. Budworth.

Details of the number of forms issued, tests carried out and B.C.G. given during the year are as follows:

### BEFORE VACCINATION

No. of consent forms issued	....	....	....	....	829
No. of children for whom consent received	....	....	....	....	655
No. Mantoux tested	....	....	....	....	637
No. positive to Mantoux Test	....	....	....	....	194
No. vaccinated with B.C.G.	....	....	....	....	435

### AFTER B.C.G. VACCINATION

No. having follow-up Mantoux (8 weeks)	....	....	....	447
No. positive to follow-up Mantoux (8 weeks)	....	....	....	436
No. positive to follow-up Mantoux (12 months)	....	....	....	289
No. negative to follow-up Mantoux (12 months)	....	....	....	6

Arrangements were made with the No. 3 Mass Radiography Unit to visit schools in the Division to X-ray the children found to have a positive reaction to the Mantoux test. Mass X-ray was also extended to teachers and staff of the schools where a high Mantoux rate was found. No infectious lung cases were discovered.

## Care of the Aged

The care and after-care of old people living on their own has continued to be a most difficult problem, but in conjunction with General Practitioners and Health Visitors, assistance has been given to have cases admitted to a suitable hospital or home for the aged, or where this has not been possible, the provision of a domestic help and a visit by the District Nurse.

Whenever there are relations and friends, contact is made with them, if required, so that they can be reminded of their responsibility in the care of the old people and more help could and should be given by relatives in many cases.

As previously mentioned, patients are encouraged to arrange for someone to live in whenever possible and practicable.

The "Over 60" Club in Runcorn and the "Darby and Joan" Club in Frodsham do very good work in the care of old people, and their work could, with advantage, be copied elsewhere in the Division. In addition, Women's Institutes, Townswomen's Guilds and Church Organisations take an interest in old people's welfare, working in conjunction with ward and parish councils.

The Central Council of Social Service, Warrington, has arranged for their voluntary assistants to visit old people living on their own in the Runcorn and Stockton Heath districts. They visit the old people at regular intervals and take books, periodicals, etc., and assist them in any way possible.

The volunteers visiting old people and/or disabled have carried out very good work with discretion.

Much valuable assistance has been given to the old people by these voluntary workers.

## Loan of Nursing Equipment

Supplies of nursing equipment, apparatus, etc., are available for loan to patients from stocks supplied to district nurses, in accordance with the scale agreed to by the Cheshire County Council and my Committee. A reserve stock is also kept at my Divisional Office.

A patient borrowing equipment under the above heading is required to pay a deposit, which is refunded when the article is returned in good condition.

There has been a steady demand for this equipment during the year, and this service is much appreciated by those concerned.



## **Convalescent Home Treatment**

The Committee has power to send persons in need of rest but not nursing care to convalescent homes. Only one application was received for such treatment during the year, and arrangements were made for two weeks' convalescent home treatment for the patient.

The patients are required to pay towards the cost of their stay in these homes, according to the scale laid down by the County Council. The full cost is usually beyond the means of most cases.

## **Handicapped Persons**

A Register of Handicapped Persons is kept in my office and the patients are visited by the health visitors to ascertain what assistance can be given to these persons, working in conjunction with the various voluntary societies, etc.

## **Home Occupation**

In a few cases where patients are suffering from prolonged disability, resultant upon injury or sickness, arrangements have been made, in conjunction with the chest physicians and/or the patient's medical practitioner, and the British Red Cross Society for the supply of materials and apparatus for home occupation.

The patients have found very great interest in the work and a new pleasure in life.

Some health visitors have given the greatest assistance to me in this important matter.

It is hoped to increase this service during 1957 for cases requiring occupational therapy in the home, via health visitors, etc., especially for tuberculous cases.

## **Health Education**

This is best spread by personal contacts; the health visitors pay special attention to Health Education in their day-to-day work.

Copies of my pamphlet "Commonsense Preventive Measures Against Disease" have been widely distributed throughout the Division, and posters on health education matters have been forwarded to shops, etc., for display.

Pamphlets are also left at homes where there are cases of infectious disease, giving details of the precautions to be taken to avoid the spread of infection.



## SECTION 29 — DOMESTIC HELP SERVICE

The number of domestic helps employed at 31st December, 1956, was 30.

The number of cases provided with domestic help during the year increased from 149 to 162, an increase of 13, mostly required for cases of illness. The total number of hours domestic helps were supplied to cases during the year was 26,570 compared with 24,830 in 1955, an increase of 1,740 hours.

The demand on this service continued to increase, especially for the aged persons group, and although there were only two more cases of aged persons supplied with help during the year, the number of hours help was supplied to this group increased considerably.

In a number of cases it was necessary to increase the amount of help supplied to old people, owing to a deterioration in their health, and until such time as accommodation could be found for them in a suitable hospital or home. The demand on the Hospital Authorities and the County Welfare Department for accommodation for old people continues to increase, and this service is of considerable assistance in helping to care for them until such time as suitable accommodation can be found.

Most old people do not wish to enter hospital or homes for the aged, but to remain in their own homes as long as possible, and every effort is made, with the aid of this service and additional help from relatives and neighbours, visits by members of voluntary societies and, when necessary, visits by the District Nurse, to make this possible.

With the aid of the Domestic Help Service it has certainly been possible to look after quite a large number of patients, who, without this help, would have had to be admitted to a hospital or Home.

The following table shows the types of cases supplied with help during 1955 and 1956:

<i>Year</i>	<i>Confinement Cases</i>	<i>Tuberculosis Cases</i>	<i>Aged Persons</i>	<i>Cases of Other Illness</i>
1956	22	5	106	29
1955	20	6	104	19

All applications for the services of domestic help were carefully investigated, and only where help was absolutely necessary was this supplied.

At the 31st December, 1956, there were 71 protracted cases remaining on the register, a decrease of 7 on the 1955 total.

The service is not free to patients but subject to the County Council Scale of Assessment.

Where any hardship is claimed after the assessment, the case is referred to the Divisional Health Committee for their decision in the matter. During the year 3 cases were submitted to the Committee for consideration, and reductions made in all cases.



